Fill in this information to identify yo		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if thi amended fi

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is government-issued pic identification (for exam	ture First Name	Neallisha First Name
your driver's license or passport).	· · •	S. Middle Name
	French	French
Bring your picture	Last Name	Last Name
identification to your m with the trustee.	eeting Sr. Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you have used in the last	8 First Name	First Name
years		
Include your married o	Middle Name	Middle Name
maiden names.	Last Name	Last Name
3. Only the last 4 digits your Social Security	of xxx - xx - 8 9 2	1 xxx - xx - <u>6</u> <u>3</u> <u>5</u> <u>6</u>
number or federal Individual Taxpayer	OR	OR
Identification number	9xx - xx	9xx - xx

Debt Debt			Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case)			
	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	I have not used any business names or EIN			
	(EIN) you have used in the last 8 years	Business name	Business name			
	Include trade names and	Business name	Business name			
	doing business as names	Business name	Business name			
		EIN	EIN			
			-			
. Where you live		EIN	If Debtor 2 lives at a different address:			
		2915 Quail Hawk Dr.				
		Number Street	Number Street			
		Houston TX 77014				
		City State ZIP Code	City State ZIP Code			
		Harris				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number Street	Number Street			
		P.O. Box	P.O. Box			
		City State ZIP Code	City State ZIP Code			
	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Pa	rt 2: Tell the Court A	bout Your Bankruptcy Case				
	The chapter of the		stice Required by 11 U.S.C. § 342(b) for Individuals F			
	Bankruptcy Code you are choosing to file under	for Bankruptcy (Form 2010)). Also, go to the top of proceed that the control of t	page 1 and cneck the appropriate box.			
	unud					
		Chapter 11				
		Chapter 12				
		Chapter 13				

		Brandon D. French, Neallisha S. French	Sr.	Case number (if known)							
8. How y		you will pay the fee		court by	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).							
				I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.							
9. Have you file			$\overline{\mathbf{V}}$	No							
	last 8 ye	otcy within the ears?		Yes.							
			Dist	rict		When		Case number			
			Dist	rict		When	MM / DD / VVVV	Case number			
			Diet	rict							
						*******	MM / DD / YYYY				
10.	-	bankruptcy	$\overline{\mathbf{V}}$	No							
	-	ending or being a spouse who is	П	Yes.							
	not filin	g this case with	Deb	tor			Relationsh	ip to you			
	•	by a business , or by an						Case number,			
	affiliate	•	Dist	—		_ when	MM / DD / YYYY				
			Deb	tor			Relationsh	ip to you			
			Dist	rict		When	MM / DD / YYYY	Case number,if known			
11.	Do you residen	rent your ce?		No. Yes.	Go to line 12. Has your landlord obtained an eviction	judgmen	t against you?				
					✓ No. Go to line 12.✓ Yes. Fill out Initial Statement About and file it as part of this bankrupto		-	Against You (Form 101A)			

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	tor 1 Brandon D. Fre Neallisha S. Fre								
P	art 3: Report Abou	t Any B	usine	sses You Own as a So	le Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?		✓ No. Go to Part 4.✓ Yes. Name and location of business						
	A sole proprietorship is a business you operate as a individual, and is not a separate legal entity such a corporation, partnership, LLC.	as		Name of business, if any Number Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			City Check the appropriate box Health Care Business Single Asset Real Est Stockbroker (as define Commodity Broker (as	101(27A)) C. § 101(51B))	ZIP Code			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>		If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).						
	debtor?		No.	I am not filing under Chapte	er 11.				
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definitio the Bankruptcy Code.				g to the definition in	
			Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				ne definition in the	
P	art 4: Report If You	Own o	r Hav	e Any Hazardous Prop	perty or Any Property	/ That Need	ls Imm	ediate Attention	
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?					
	hazard to public health o safety? Or do you own any property that needs immediate attention?			If immediate attention is ne	eded, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, a building that needs urger repairs?			Where is the property?	nber Street				
				City		<u> </u>	tate	ZIP Code	

Debtor 1	Brandon D. French, Sr.	
Debtor 2	Neallisha S. French	Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:							
☐ Incapacity.	I have a mental illness or a mental						

☐ I am not required to receive a briefing about

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Brandon D. French, Debtor 2 Neallisha S. French										
P	art 6:	Answer These Q	uest	ions for Reporting Pu	rpos	ses				
16.	What ki have?	nd of debts do you	16a			mer debts are defined in 11 U.S.C. § 101(8) family, or household purpose."				
			16b	 Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 						
			16c	. State the type of debts yo	u owe	e that are not consumer or bus	siness	s debts.		
17.	Are you Chapte	ı filing under r 7?		No. I am not filing under	Chap	oter 7. Go to line 18.				
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	☑			•	-	xempt property is excluded and to distribute to unsecured creditors?		
18.		any creditors do imate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000		
19.		uch do you e your assets to h?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.		uch do you e your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		

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Debtor 1 Debtor 2	Brandon D. French, Neallisha S. French							
Part 7:	Sign Below							
For you		I have examined this petition, and I declare u and correct.	inder penalty of perjury that the information provided is true					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not par fill out this document, I have obtained and re	y or agree to pay someone who is not an attorney to help me ad the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		•	ealing property, or obtaining money or property by fraud in the first in fines up to \$250,000, or imprisonment for up to 20 years, 3571.					
		X /s/ Brandon D. French, Sr.	X /s/ Neallisha S. French					
		Brandon D. French, Sr., Debtor 1	Neallisha S. French, Debtor 2					
		Executed on 03/28/2019	Executed on 03/28/2019					

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Debtor 2	Brandon D. French Neallisha S. French	•	Case number (if kno	wn)			
For your a represente	ttorney, if you are ed by one	eligibility to proceed under Chapt	amed in this petition, declare that I hav ter 7, 11, 12, or 13 of title 11, United St ter for which the person is eligible. I al:	tates Code, and have explained the			
If you are not represented by an attorney, you do not need to file this page.		the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
		X /s/ Christopher Morrison Signature of Attorney for Deb		e 03/28/2019 MM / DD / YYYY			
		Christopher Morrison Printed name					
		Christopher Todd Morris Firm Name	on, P.C.				
		1306 Dorothy Street Number Street					
		- Street					
		Houston	тх	77008			
		City	State	ZIP Code			
		Contact phone (713) 863-1	Email address attyc	etm2100@yahoo.com			
		24010250	TX	<u> </u>			
		Bar number	State				

Fill in this info	rmation to ide	ntify you	ur case an	d this filing:				
	Brandon	D.		French, Sr.				
	First Name	Middle N	ame	Last Name	-			
	Neallisha	S.		French	_			
(Spouse, if filing)	First Name	Middle N	ame	Last Name				
United States Bank	cruptcy Court for th	ne: SOUTI	HERN DIST	RICT OF TEXAS	_			
Case number (if known)							eck if this is a ended filing	n
Official Form	106A/B							
Schedule A/E	B: Property							12/15
filing together, both sheet to this form.	n are equally resp On the top of any	onsible fo additiona	r supplying Il pages, wri	s complete and accurate correct information. If m te your name and case no Land, or Other Real	nore numb	space is needed, attacl er (if known). Answer	n a separate every question	
✓ No. Go to			e interest in	any residence, building, l	land	I, or similar property?		
2. Add the dollar	value of the porti	on you ow	-	our entries from Part 1, i			-	\$0.00
Part 2: Desc	cribe Your Vel	nicles						
you own that someon	ne else drives. If y	ou lease a	vehicle, also	y vehicles, whether they oreport it on Schedule G: I		-	•	
3. Cars, vans, tru □ No □ Yes	cks, tractors, spo	ort utility v	ehicles, mot	orcycles				
3.1. Make:	Honda		Who has an i Check one. Debtor 1	nterest in the property?		Do not deduct secured amount of any secured Creditors Who Have Cl	claims on Sca	hedule D:
Model: Year:	Accord 2005		Debtor 2	•		Current value of the	Current	value of the
Approximate mileage		 [and Debtor 2 only		entire property?	•	you own?
Other information:	223,010	— [At least o	ne of the debtors and anot	ther	\$2,500.0	<u> </u>	\$2,500.00
2005 Honda Acco	ord (approx. 225	i,016 [Check if (see instr	this is community proper uctions)	erty			
3.2.				nterest in the property?		Do not deduct secured		•
Make:	Nissan	:	Check one.	only		amount of any secured Creditors Who Have Cl		
Model:	Altima	[[Debtor 1 Debtor 2	•		Current value of the		value of the
Year:	2011		Debtor 2 only Debtor 1 and Debtor 2 only		entire property?		you own?	
Approximate mileage	e: 126,255	— Ī	At least o	ne of the debtors and anot	ther	\$7,520.0	0	\$7,520.00
Other information:	00 (000rev 400	255 5	Chook if	this is community proper	rés.			
2011 Nissan Altin miles)	na (approx. 126,	,∠ວວ [Check if (see instr	this is community proper uctions)	ııy			

	otor 1 otor 2	Brandon D. French, Sr. Neallisha S. French Case number (if known)	
4.		raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories les: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
5.		e dollar value of the portion you own for all of your entries from Part 2, including any for pages you have attached for Part 2. Write that number here	\$10,020.00
P	art 3:	Describe Your Personal and Household Items	
Do	you own	or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
	□ No ☑ Yes	5. Describe Kitchen utensils and dishware \$200, kitchen table and chairs \$100, sofa \$200, chairs \$100, coffee table \$30, lamps \$40, 4 beds \$400, dresser \$40, towels and linens \$130	\$1,240.00
7.	Electro Example	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	□ No ✓ Yes	s. Describe 3 tvs \$350, 2 cell phones \$600	\$950.00
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	□ No ✓ Yes	s. Describe Books, pictures, decorations	\$70.00
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	□ No ✓ Yes	s. Describe 3 bicycles \$150, treadmill \$50, weights \$50, misc childrens toys and sports equipment \$55	\$255.00
10.	Firearn Example No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment	
	_	s. Describe	
11.	Clothe: Example	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes	s. Describe Clothing, shoes, belts etc	\$635.00
12.	Jewelry Example	/ les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	□ No ✓ Yes	s. Describe Jewelry, rings, earrings, necklaces, watches	\$795.00
13.		rm animals les: Dogs, cats, birds, horses	
	✓ No ☐ Yes	s. Describe	

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	tor 1 tor 2	Brandon D. From Neallisha S. Fr				Case number (if known)	
14.	did not No Yes	•	household items	you	did not already list, including	any health aids you	
15.	Add the	e dollar value of a ed for Part 3. Wri	all of your entries te the number he	from	n Part 3, including any entries	for pages you have	\$3,945.00
P	art 4:	Describe Yo	our Financial A	Asse	ets		
Do	you owr	or have any lega	al or equitable int	erest	t in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examp	les: Money you ha petition	ave in your wallet,	in yoı	ur home, in a safe deposit box, a	and on hand when you file your	
	☐ No ✓ Yes					Cash:	\$55.00
17.		-	uses, and other si		accounts; certificates of deposit institutions. If you have multiple		
	□ No ☑ Yes	S	Instit	ution	name:		
	17	.1. Checking ac	count: Che	ckin	g account, Chase Bank		\$695.00
18.	Examp ✓ No		nvestment accour	ts wit	th brokerage firms, money marke	et accounts	
19.	Non-pu		ck and interests i	n inc	corporated and unincorporated	l businesses, including	
	✓ No ☐ Yes				cinale	% of ownership:	
20.	Negotia	able instruments in	ate bonds and of	her n	negotiable and non-negotiable, cashiers' checks, promissory not transfer to someone by signing	instruments otes, and money orders.	
	info	s. Give specific ormation about m	Issuer name:				
21.		nent or pension a les: Interests in IR profit-sharing	A, ERISA, Keogh	, 401((k), 403(b), thrift savings accoun	ts, or other pension or	
	ب	s. List each count separately.	Type of account		Institution name:		
			401(k) or similar	plan:	: 401(k)		\$1,269.00

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	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French Case number	(if known)	
22.	Your sh Examp	ity deposits and prepayments thare of all unused deposits you have made so that you may continue service or use from a coles: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommanies, or others		
	□ No			
	✓ Yes	es Institution name or individual:		
		Security deposit on rental unit: Security deposit on rental unit		\$1,495.00
	✓ No ☐ Yes	ties (A contract for a specific periodic payment of money to you, either for life or for a num os		ogram.
	26 U.S. No	S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		
	_	es	nterests. 11 U.S.C.	§ 521(c)
25.		s, equitable or future interests in property (other than anything listed in line 1), and rig rs exercisable for your benefit	hts or	
		o es. Give specific formation about them		
26.		ts, copyrights, trademarks, trade secrets, and other intellectual property; oles: Internet domain names, websites, proceeds from royalties and licensing agreements		
		o es. Give specific formation about them		
27.	Examp	ses, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association holdings, liquor licenses	, professional licen	ses
		o es. Give specific formation about them		
Mor	ney or p	property owed to you?		Current value of the portion you own? Do not deduct secured
				claims or exemptions.
28.	Tax ref	efunds owed to you		
	☑ No			
		es. Give specific information out them, including whether	Federal	:
		ou already filed the returns	State:	
	and	nd the tax years	Local:	
29.	-	y support bles: Past due or lump sum alimony, spousal support, child support, maintenance, divorce	settlement, property	/ settlement
	√ No			
		es. Give specific information	Alimony:	
			Maintenance:	
			Support:	
			Divorce settlement:	
			Property settlement	:

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	tor 1 tor 2	Brandon D. French, Neallisha S. French	Sr.	Case number (if known)	
20	Other	mounts compone owes	2.1011		
30.			•	penefits, sick pay, vacation pay, workers' u made to someone else	
	✓ No ☐ Yes	s. Give specific informati	ion		
31.		ts in insurance policies les: Health, disability, or		nt (HSA); credit, homeowner's, or renter's insur	ance
	ت ب	s. Name the insurance npany of each policy			
		l list its value	Company name:	Beneficiary: S	Surrender or refund value:
			Life Insurance Policy (term)	Debtors children	\$1.00
32.	If you a		s due you from someone who has ing trust, expect proceeds from a life tuse someone has died		
	✓ No ☐ Yes	s. Give specific informati	ion		
33.		•	hether or not you have filed a law ent disputes, insurance claims, or rig	suit or made a demand for payment ghts to sue	
	✓ No ☐ Yes	s. Describe each claim			
34.		ontingent and unliquid	ated claims of every nature, includ	ling counterclaims of the debtor and	
	✓ No ☐ Yes	s. Describe each claim			
35.	Any fin	ancial assets you did n	ot already list		
	✓ No	s. Give specific informati	ion		
36.			our entries from Part 4, including a	any entries for pages you have	\$3,515.00
P	art 5:	Describe Any Busi	ness-Related Property You	Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any legal	or equitable interest in any busine	ess-related property?	
		Go to Part 6. s. Go to line 38.			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accour	nts receivable or commi	issions you already earned		ciains of exemptions.
	✓ No	s. Describe			
39.		equipment, furnishings, les: Business-related cor desks, chairs, electro	mputers, software, modems, printers	s, copiers, fax machines, rugs, telephones,	
	✓ No	s. Describe			

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	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French Case number (if known)					
40.	10. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade						
	✓ No ☐ Yes	s. Describe					
41.	Invento	ory					
	✓ No ☐ Yes	s. Describe					
42.	Interes	ts in partnerships or joint ventures					
	✓ No	s. Describe Name of entity: % of ownership:					
43.	Custon	ner lists, mailing lists, or other compilations					
	✓ No ☐ Yes	s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe					
44.	Any bu	siness-related property you did not already list					
	✓ No ☐ Yes	s. Give specific information.					
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have ed for Part 5. Write that number here	\$0.00				
P		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a If you own or have an interest in farmland, list it in Part 1.	n Interest In.				
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?					
		Go to Part 7. s. Go to line 47.					
			Current value of the portion you own? Do not deduct secured claims or exemptions.				
47.	Farm a Example No □ Yes	les: Livestock, poultry, farm-raised fish					
48.	Crops-	either growing or harvested					
	✓ No ☐ Yes	s. Give specific					
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade					
	✓ No ☐ Yes	S					
50.	Farm a	nd fishing supplies, chemicals, and feed					
	✓ No ☐ Yes	S					

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	otor 1 otor 2	Brandon D. French, Sr. Neallisha S. French	Case no	umber (if known)		
51.	Any fai	m- and commercial fishing-related property you did no	ot already list			
		s. Give specific				
52.	Add the		\$0.00			
P	art 7:	Describe All Property You Own or Have an I	nterest in That You I	Did Not List Abov	'e	
53.		have other property of any kind you did not already listles: Season tickets, country club membership	st?			
	✓ No ☐ Yes	s. Give specific information.				
54.	Add the	e dollar value of all of your entries from Part 7. Write t	nat number here		·	\$0.00
P	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2			·	\$0.00
56.	Part 2:	Total vehicles, line 5	\$10,020.00			
57.	Part 3:	Total personal and household items, line 15	\$3,945.00			
58.	Part 4:	Total financial assets, line 36	\$3,515.00			
59.	Part 5:	Total business-related property, line 45	\$0.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	+\$0.00			
62.	Total p	ersonal property. Add lines 56 through 61	\$17,480.00	Copy personal property total	+	\$17,480.00
63.	Total o	f all property on Schedule A/B. Add line 55 + line 62				\$17,480,00

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If mo space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number off known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim as exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemptions would be limited to the applicable statutory amount. Part : Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(1) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description: Schedule A/B that lists this property Brief description: Schedule A/B: 3.1 Brief description: Schedule A/B: 3.2 Schedule A/B: 3.3 Are you claiming a homestead exemption of more than \$160.375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	Fill in this inf	formation to ic	lentify your	case:					
Prist Name Model Name Last Name Neallisha S. French	Debtor 1	Brandon	D.	French. S	Sr.				
Spouse, if filing) Frest Name Last Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS Check if this is an amended filing amended filing Check if this is an amended filing Check if this	Debior 1				<i>,,,</i>				
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS Case number (if known) Official Form 106C Schedule C: The Property You Claim as Exempt 04/ Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule AB: Property (Official Form 106AB) as your source, list the property that you claim as exempt. If mo space is needed, fill out and attach to this page as amany copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full flaf market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) You are claiming state and federal nonbankruptcy exemptions. Case the value from Schedule A/B that lists this property and line on Schedule A/B that just this property and line on Schedule A/B that you claim as exemption. Cay the value from Schedule A/B. 21. Vol. (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Section of the property of the property of the property of the prop		Neallisha							
Case number (if known) Official Form 106C Schedule C: The Property You Claim as Exempt Deas complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If you give the property you claim as exempt. If you are daining to the amount of any applicable statutory limit. Some exemption and case number of known). For each item of property you claim as exempt, Nou must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exemption of the amount of any applicable statutory limit. Some exemptions—such as those for health alds, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, it you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemptions would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) You are claiming to the property and line on Schedule A/B that lists this property Specific laws that allow exemption to the property you list on Schedule A/B that lists this property Specific laws that allow exemption of the property pour lamin and property in the portion your exemption. Property you are desirated as a specific laws that allow exemption Specific laws that allow exemption Schedule A/B Specific laws that allow exemption Specific laws that allow exem	(Spouse, if filing)) First Name	Middle Nam	ne Last Name					
Official Form 106C Schedule C: The Property You Claim as Exempt Dear as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If mo space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full flair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health adia, rights to receive certain benefits, and tax-exempt refirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value of the armount and the value of the property being exempted up to the amount of any applicable statutory amount. Part 1: Identify the Property You Claim as Exempt	United States Ba	inkruptcy Court for	the: SOUTHE	RN DISTRICT OF 1	EXA	NS		Check if this is an	
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Using the property you isleed on Schedule A/B. Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If me space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so its to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health alds, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Schedule A/B that lists this property Carpy the value from Schedule A/B: 3.1 Selfet description: 2. \$2,500.00 You sold fair market value, up to any applicable statutory limit Brief description: 2. \$5,500.00 You sold fair market value, up to any applicable statutory limit Selfet description: 2. \$5,500.00 You sold fair market value, up to any applicable statutory limit Selfet description: 2. \$5,500.00 You sold fair market value under the date of adjustment.) No	Schedule C	: The Prope	rty You C	laim as Exemp	ot				04/16
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1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Check only one box for each exemption: 2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1 Brief description: 2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 \$7,520.00 \$7,520.00 \$7,520.00 \$100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(2) 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	is to state a speci exempted up to the receive certain be exemption of 100	ific dollar amount he amount of any enefits, and tax-ex % of fair market v	as exempt. A applicable sta cempt retiremental alue under a l	Iternatively, you may itutory limit. Some ex ent fundsmay be unl aw that limits the exe	claii emp imite mpti	n the full fa tionssuch d in dollar on to a par	nir market v n as those amount. H ticular doll	value of the property being for health aids, rights to However, if you claim an ar amount and the value of the	
you are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value from Schedule A/B that lists this property Brief description: 2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1 Brief description: 27 \$0.00 100% of fair market value, up to any applicable statutory limit Brief description: 2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	Part 1: Ide	entify the Prop	erty You Cl	aim as Exempt					
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Brief description of the property Current value of the portion you own Copy the value from Schedule A/B that lists this property Brief description: 2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1 Brief description: 27 \$2,500.00 \$0.00 100% of fair market value, up to any applicable statutory limit \$3,10 \$10.00 of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$3,00 100% of fair market value, up to any applicable statutory limit \$3,000 100% of fair market value, up to any applicable statutory limit \$3,000 100% of fair market value, up to any applicable statutory limit \$4,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000 \$5,000	2. For any prop	erty vou list on S	chedule A/B t	hat vou claim as exer	nnt. f	ill in the in	formation	helow.	
Schedule A/B that lists this property the portion you own Copy the value from Schedule A/B Brief description: 2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1 Brief description: 211 U.S.C. § 522(d)(2)				nat you claim as exci	iipt, i		ioiiiiatioii	below.	
Brief description: 2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1 Srief description: 21 \$0.00 100% of fair market value, up to any applicable statutory limit Strief description: 2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	-			the portion you				Specific laws that allow exemption	on
2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1						•			
2005 Honda Accord (approx. 225,016 miles) Line from Schedule A/B: 3.1	Drief description			\$2.500.00	_	¢0	00	44.11.0.0. \$ 500/4/\0\	
walue, up to any applicable statutory limit Brief description: 2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)		cord (approx 2	25 016	\$2,500.00	Μ			11 U.S.C. § 522(d)(2)	
applicable statutory limit Brief description: 2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No		oora (approx. 21	20,010		Ш				
2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	•	e A/B: 3.1				applicable	•		
2011 Nissan Altima (approx. 126,255 miles) Line from Schedule A/B: 3.2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	Brief description:			\$7 520 00		\$54	.00	11 U.S.C. 8 522(d)(2)	
value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)	•	ima (approx. 12	6.255	Ψ1,320.00				11 0.3.6. § 322(u)(2)	
 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No 	miles)		,		Ц	value, up t applicable	to any		
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No						limit			
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No									
✓ No	•	_	-			ed on or aft	er the date	of adjustment.)	
Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No	✓ No ☐ Yes. Did		·	•				,	

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French Case number (if known) Part 2: **Additional Page** Brief description of the property and line on Current value of Amount of the Specific laws that allow exemption Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$1,240.00 \$1,240.00 11 U.S.C. § 522(d)(3) $\overline{\mathbf{Q}}$ Kitchen utensils and dishware \$200, 100% of fair market kitchen table and chairs \$100, sofa \$200, value, up to any applicable statutory chairs \$100, coffee table \$30, lamps \$40, 4 beds \$400, dresser \$40, towels and linens limit \$130 Line from Schedule A/B: Brief description: \$950.00 $\overline{\mathbf{V}}$ \$950.00 11 U.S.C. § 522(d)(3) 3 tvs \$350, 2 cell phones \$600 100% of fair market value, up to any Line from Schedule A/B: applicable statutory limit Brief description: \$70.00 11 U.S.C. § 522(d)(3) \$70.00 $\overline{\mathbf{V}}$ Books, pictures, decorations 100% of fair market П value, up to any Line from Schedule A/B: 8 applicable statutory limit Brief description: \$255.00 \$255.00 11 U.S.C. § 522(d)(5) $\overline{\mathbf{Q}}$ 3 bicycles \$150, treadmill \$50, weights 100% of fair market \$50, misc childrens toys and sports value, up to any equipment \$55 applicable statutory limit Line from Schedule A/B: Brief description: \$635.00 11 U.S.C. § 522(d)(3) \$635.00 $\overline{\mathbf{Q}}$ Clothing, shoes, belts etc 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$795.00 11 U.S.C. § 522(d)(4) $\overline{\mathbf{Q}}$ \$795.00 Jewelry, rings, earrings, necklaces, 100% of fair market watches value, up to any applicable statutory Line from Schedule A/B: 12 limit Brief description: \$55.00 \$55.00 11 U.S.C. § 522(d)(5) ablaCash on hand 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description: \$695.00 \$695.00 11 U.S.C. § 522(d)(5) $oldsymbol{
abla}$ **Checking account, Chase Bank** 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit

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Debtor 1 Debtor 2	Brandon D. French, Sr. Neallisha S. French		Case number	(if known)
Part 2:	Additional Page			
	ription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: 401(k) Line from Schedule A/B:21		<u>\$1,269.00</u>	\$1,269.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Brief descr Security	ription: deposit on rental unit	\$1,495.00	\$1,495.00 100% of fair market	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 22			value, up to any applicable statutory limit	
	ription: rance Policy (term) Schedule A/B: 31	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(7)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Brandon D. French, Sr. Neallisha S. French

CASE NO

CHAPTER 7

Scheme Selected: Federal

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$10,020.00	\$10,124.00	\$54.00	\$54.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$1,240.00	\$0.00	\$1,240.00	\$1,240.00	\$0.00
7.	Electronics	\$950.00	\$0.00	\$950.00	\$950.00	\$0.00
8.	Collectibles of value	\$70.00	\$0.00	\$70.00	\$70.00	\$0.00
9.	Equipment for sports and hobbies	\$255.00	\$0.00	\$255.00	\$255.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$635.00	\$0.00	\$635.00	\$635.00	\$0.00
12.	Jewelry	\$795.00	\$0.00	\$795.00	\$795.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household itemsincl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$55.00	\$0.00	\$55.00	\$55.00	\$0.00
17.	Deposits of money	\$695.00	\$0.00	\$695.00	\$695.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$1,269.00	\$0.00	\$1,269.00	\$1,269.00	\$0.00
22.	Security deposits and prepayments	\$1,495.00	\$0.00	\$1,495.00	\$1,495.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Brandon D. French, Sr. Neallisha S. French

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

TOTALS:

Scheme Selected: Federal (Values and liens of surrendered property are NOT included in this section) Gross Total Total Amount Total **Total Amount Property Value Encumbrances Equity** Exempt Non-Exempt Category No. 29. Family support \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 30. \$0.00 \$0.00 \$0.00 \$0.00 Other amounts someone owes you \$0.00 31. Interests in insurance policies \$1.00 \$0.00 \$1.00 \$1.00 \$0.00 32. Any int. in prop. due you from \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 someone who has died 33. Claims vs. third parties, even \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 if no demand 34. Other contin. and unliq. claims \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 of every nature 35. Any financial assets you did \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 not already list Accounts rec. or commissions you \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 38. already earned 39. Office equipment, furnishings, \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 and supplies 40. Mach., fixt., equip., bus. suppl., \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 tools of trade 41. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Inventory 42. Interests in partnerships or \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 joint ventures 43. Customer and mailing lists, or \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 other compilations Any business-related property not \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 44. already listed Farm animals \$0.00 \$0.00 \$0.00 47. \$0.00 \$0.00 48. Crops--either growing or harvested \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 49. Farm/fishing equip., impl., mach., \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 fixt., tools 50. Farm and fishing supplies, chemicals, \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 and feed 51. Farm/commercial fishing-related prop. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 not listed 53. Any other property of any kind not \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 already listed

\$17,480.00

\$10,124.00

\$7,514.00

\$7,514.00

\$0.00

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Brandon D. French, Sr. Neallisha S. French

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description Market Value Lien **Equity Real Property** (None) **Personal Property** (None) \$0.00 \$0.00 \$0.00 TOTALS: Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt. **Market Value** Lien **Equity Property Description Non-Exempt Amount Real Property** (None) **Personal Property** (None)

TOTALS: \$0.00 \$0.00 \$0.00

Summary	
A. Gross Property Value (not including surrendered property)	\$17,480.00
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$17,480.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$10,124.00
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$10,124.00
G. Total Equity (not including surrendered property) / (A-D)	\$7,514.00
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$7,514.00
J. Total Exemptions Claimed (Wild Card Used: \$2,500.00, Available: \$23,700.00)	\$7,514.00
K. Total Non-Exempt Property Remaining (G-J)	\$0.00

		416				
Fill in this info	ormation to ide	ntify your case	:			
Debtor 1	Brandon First Name	D. Middle Name	French, Sr. Last Name			
Daluta a C						
Debtor 2 (Spouse, if filing)	Neallisha First Name	S. Middle Name	French Last Name	—		
United States Bar	akruptov Court for th	o SOUTHERN F	NETDICT OF TEVAS			
	ikrupicy Court for th	ie. <u>300THERN L</u>	DISTRICT OF TEXAS			
Case number (if known)					Check if this is	
					amended filing	}
Official Form	106D					
Schedule D:	Creditors W	ho Have Cla	nims Secured by	Property		12/15
1. Do any credit No. Chee Yes. Fill Part 1: Lis List all secure	additional pages, very sors have claims see the ck this box and subjuint all of the information all Secured Ced claims. If a creed claims.	ecured by your promit this form to the tion below. laims	court with your other sche	rn). edules. You have noth	ning else to report on th	is form.
creditor has a	particular claim, list ible, list the claims i	the other creditors	ch claim. If more than one the creditors in Part 2. As the habetical order according to the value to the the control of the c		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		Describe the	e property that	\$2,658.00	\$2,500.00	\$158.00
SK Enterprises		2005 Hond				•
Creditor's name 5202 Bingle Rd		2000 110110	u 7.000. u			
Number Street						
Houston City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c	Debtor 2 only the debtors and and	Continge Unliquid. Disputed Nature of lie An agree Statutory Judgmen	ated	s mortgage or secured	car loan)	
Date debt was inc	urred	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$2,658.00

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Debtor 2 Brandon D. French, Sr. Neallisha S. French		Case number (if known)					
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Vehicle Solutions Corp Creditor's name 104 Crandon Blvd Ste 400 Number Street	Describe the property that secures the claim: 2011 Nissan Altima	\$7,466.00	\$7,520.00				
Key Biscayne FL 33149 City State ZIP Code Who owes the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Purchase Money						
Date debt was incurred	Last 4 digits of account number						

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,466.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$10,124.00

Fill in this inf	ormation to id	lentify your o	ase:			
Debtor 1	Brandon	D.	French, Sr.	_		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	Neallisha First Name	S. Middle Name	French Last Name	_		
(Spouse, il lilling)	riistivame	Middle Name	Lastiname			
United States Bar	nkruptcy Court for	the: SOUTHER	RN DISTRICT OF TEXAS	_		
Case number					Check if this is a	an.
(if known)				_	amended filing	ai i
Official Form	106E/F					
Schedule E/	F: Creditor	s Who Hav	e Unsecured Claims			12/15
to this page. On t	he top of any add	ditional pages, v	ill it out, number the entries in t vrite your name and case numb secured Claims		tach the Continu	ation Page
-	tors have priority	unsecured ciai	ms against you?			
□ No. Go t	to Part 2.					
∀ Yes.						
claim. For ear show both price more space is	ch claim listed, ide ority and nonpriori	entify what type of ty amounts. As r ty unsecured clai	creditor has more than one priori of claim it is. If a claim has both p nuch as possible, list the claims in ms, fill out the Continuation Page	riority and nonpriority amon	ounts, list that clain	m here and or's name. If
(For an explar	nation of each type	e of claim, see th	e instructions for this form in the i			
				Total claim	Priority amount	Nonpriority amount
2.1				\$3,322.00	\$3,322.00	\$0.00
IRS				·		
Priority Creditor's Nam Centralized Inso		on	- Last 4 digits of account numb			
Number Street	overicy Operati	OII	When was the debt incurred?		_	
P.O. Box 7346			- As of the date you file, the cla	im is: Check all that app	ly.	
			Contingent Unliquidated			
Philadelphia City		19101-7346 ZIP Code	- Disputed			
City Who incurred the			Type of PRIORITY unsecured	claim.		
Debtor 1 only			☐ Domestic support obligation			
Debtor 2 only	Nobtor 2 only		Taxes and certain other del	bts you owe the governme	ent	
Debtor 1 and D At least one of	the debtors and a	inother	Claims for death or personal intoxicated	al injury while you were		
ш	laim is for a com		Other. Specify			
Is the claim subje	ct to offset?		_			
✓ No Yes						
⊔ '∽						

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Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims
 Yes List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unsecured type of claim it is. Do not list claims already incl 	claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim
Accounts Clearing House Nonpriority Creditor's Name PO Box 2373 Number Street	\$406.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Glen Burnie City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.2	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Outstanding debt
Ace Nonpriority Creditor's Name 1231 Greenway Dr Ste 700 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated
Irving TX 75038 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Outstanding debt

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$1,397.00
ADT Alarm	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 371490 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Pittsburgh PA 15250	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
☑ No □ Yes		
4.4		\$800.00
AIC	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 8900 Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Elkridge MD 21075	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?	3	
☑ No		
☐ Yes		
4.5		¢7 207 00
	Last 4 digits of account number 1 0 0 1	\$7,397.00
American Credit Accept Nonpriority Creditor's Name	— — — — — —	
961 E Main St	<u> </u>	
Number Street	As of the date you file, the claim is: Check all that apply.	
0 / 1	Disputed	
Spartanburg SC 29302 City State ZIP Code	Type of NONERIORITY uncopured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
<u> </u>	Other. Specify	
	Repossession Deficiency	
Is the claim subject to offset? ✓ No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$10,100.00
Anne Arundel Med Ctr	Last 4 digits of account number	
Nonpriority Creditor's Name 2001 Medical Pkwy	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Annapolis MD 21401 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical bill	
Is the claim subject to offset?		
☑ No		
Yes		
4.7		\$100.00
Baltimore Washing FCU	Last 4 digits of account number	
Nonpriority Creditor's Name 301 Hospital Dr	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Glen Burnie MD 21060		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Outstanding debt	
✓ No		
Yes		
4.8		\$2,000.00
Bank of America	Last 4 digits of account number	
Nonpriority Creditor's Name 7206 Ritchie Hwy	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Glen Burnie MD 21061		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Suisiding dobt	
✓ No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$3,000.00
Bay County Financial	Last 4 digits of account number	
Nonpriority Creditor's Name 6619 Ritchie Hwy	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Glen Burnie MD 21061 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
☑ No		
Yes		
4.10		\$606.00
Caine Weiner	Last 4 digits of account number 3 1 6 0	4000.00
Nonpriority Creditor's Name	When was the debt incurred? 12/26/2017	
Po Box 55848 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Sherman Oaks CA 91413		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Unknown Loan Type	
✓ No		
Yes		
4.11		\$960.00
Capital One	Last 4 digits of account number 4 7 5 1	
Nonpriority Creditor's Name	When was the debt incurred? 05/2017	
Po Box 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Salt Lake City UT 84130	─ □ Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French Case number (if known)		
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.12		\$500.00
Capital One	Last 4 digits of account number 4 1 6 0	
Nonpriority Creditor's Name Po Box 30281	When was the debt incurred? 08/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Salt Lake City UT 84130		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		
Yes		
4.13		\$478.00
Capital One	Last 4 digits of account number 3 8 8 2	· · · · · · · · · · · · · · · · · · ·
Nonpriority Creditor's Name	When was the debt incurred? 05/2017	
Po Box 30281 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Salt Lake City UT 84130	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.14		#20.200.00
	Last 4 digits of account number 1 0 0 1	\$20,309.00
Capital One Auto Finan Nonpriority Creditor's Name	— — — — — — —	
3901 Dallas Pkwy	When was the debt incurred? 07/2012	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Diama TV TEACO	Disputed	
Plano TX 75093 City State ZIP Code	Type of NONDRIODITY uncessured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
	Repossession Deficiency	
Is the claim subject to offset? ✓ No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.15		\$100.00
Care First Blue Cross	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name PO Box 79749	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Baltimore MD 21279 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Outstanding debt	
Is the claim subject to offset?	Calculation g access	
☑ No		
Yes		
4.16		\$655.00
Cash Net	Last 4 digits of account number	· · ·
Nonpriority Creditor's Name 200 W. Jackson Blvd. 14th Floor	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60606-6941 City State ZIP Code	—	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?	-	
No You		
Yes		
4.17		\$785.00
Cash Net	Last 4 digits of account number	
Nonpriority Creditor's Name 175 West Jackson Suite 1000	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Chicago IL 60604 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.18		\$0.00
Ces/dept Of Ed	Last 4 digits of account number 3 5 6 1	
Nonpriority Creditor's Name	When was the debt incurred? 02/09/2009	
C/o Acs Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Utica NY 13501	─ ☐ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
	Educational	
Is the claim subject to offset?		
☑ No		
Yes		
4.19		#0.00
<u></u>	Loot 4 digita of account number F F F C	\$0.00
Chase Card Nonpriority Creditor's Name	Last 4 digits of account number 5 5 5 6	
P.o. Box 15298	When was the debt incurred? 09/2006	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Wilmington DE 19850 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		
4.20		\$800.00
Comcast	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 660618	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Dallas TX 75266-0618	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
☑ No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$1,191.00
Convergent Outsourcing	Last 4 digits of account number 0 3 9 7	
Nonpriority Creditor's Name 800 Sw 39th St	When was the debt incurred? 03/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Renton WA 98057		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.22		\$0.00
Credit One Bank Na	Last 4 digits of account number	
Nonpriority Creditor's Name Po Box 98875	When was the debt incurred? 12/26/2008	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		
4.23		\$829.00
Credit Protection Asso	Last 4 digits of account number4346_	
Nonpriority Creditor's Name 13355 Noel Rd Ste 2100	When was the debt incurred? 11/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Dallas TX 75240		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a constation agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☑ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No □ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.24		\$500.00
CSAA General Insurance	Last 4 digits of account number	
Nonpriority Creditor's Name 3055 OAK ROAD	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	☐ Unliquidated ☐ Disputed	
WALNUT CREEK CA 94597 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Outstanding desi	
☑ No		
Yes		
4.25		¢0 552 00
Dept Of Education/neln	Last 4 digits of account number 8 0 2 3	\$9,552.00
Nonpriority Creditor's Name	Last 4 digits of account number 8 0 2 3 When was the debt incurred? 01/13/2016	
3015 Parker Rd Number Street	As of the date you file, the claim is: Check all that apply.	
Number Sueet	_ ☐ Contingent	
	Unliquidated	
Aurora CO 80014	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Educational	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.26		\$7,924.00
Dept Of Education/neln Nonpriority Creditor's Name	Last 4 digits of account number7923	
3015 Parker Rd	When was the debt incurred? 01/13/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ U	
	— ☐ Disputed	
Aurora CO 80014 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Educational	
Is the claim subject to offset?		
☑ No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.27		\$674.00
Direct TV	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 105261	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Atlanta GA 30348-5261 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Calciumaning acti	
☑ No		
Yes		
4.28		\$674.00
Diversified Consultants, Inc.	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 1391 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Southgate MI 48195-0391		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consention agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Outstanding debt	
No No		
Yes		
4.29		\$2,500.00
Don's Auto World	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Houston TX 77090	— Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Repossession Deficiency	
No No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30 Eos Cca Nonpriority Creditor's Name Po Box 981008 Number Street Boston MA 02298 City State ZIP Code	Last 4 digits of account number 4 1 4 9 When was the debt incurred? 03/2018 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$2,456.00
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Collection Attorney 	
4.31 EOS CCA	Last 4 digits of account number	\$2,456.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 567 Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Norwell MA 02061-0567	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset? ☑ No ☐ Yes		
4.32		\$23,655.00
Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number 0 0 0 2	
Po Box 60610	When was the debt incurred? 02/2009	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Harrisburg PA 17106	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number them sequentially from the previous page.		Total claim
4.33		
Fedloan	Last 4 digits of account number 0 0 4	\$0.00
Nonpriority Creditor's Name	Last 4 digits of account number 0 0 0 4 When was the debt incurred? 09/06/2011	
Po Box 60610 Number Street	As of the date you file, the claim is: Check all that apply.	
-	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Harrisburg PA 17106		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Educational	
Is the claim subject to offset?	Eddeational	
☑ No		
Yes		
4.34		\$131.00
First Credit Services, Inc.	Last 4 digits of account number	Ψ101.00
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Piscataway NJ 08854		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Culturianing activities	
☑ No		
Yes		
4.35		\$555.00
First Premier Bank	Last 4 digits of account number 2 6 3 1	
Nonpriority Creditor's Name 3820 N Louise Ave	When was the debt incurred? 11/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Sioux Falls SD 57107 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
No No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.36		\$445.00
First Premier Bank	Last 4 digits of account number 6 4 5 9	Ψ+3.00
Nonpriority Creditor's Name	When was the debt incurred? 06/2011	
3820 N Louise Ave Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Sioux Falls SD 57107	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.37		\$1,679.00
FM 1960 Emergency Phys	Last 4 digits of account number	
Nonpriority Creditor's Name Phoenix Fin	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 98818	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Las Vegas NV 89193		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical bill	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.38		\$3,000.00
Gerber Life Insurance	Last 4 digits of account number	
Nonpriority Creditor's Name 445 State St	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Freemont MI 49412 City State ZIP Code	—	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? ✓ No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.39		\$800.00
Gold's Gym	Last 4 digits of account number	Ψοσο.σο
Nonpriority Creditor's Name	When was the debt incurred?	
7900 Ritchie Hwy Ste 129C Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Glen Burnie MO 21061		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a consention agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? No		
☑ No □ Yes		
4.40		\$75.00
Harris County Alarm Detail	Last 4 digits of account number	
Nonpriority Creditor's Name 9418 Jensen Dr. Ste A	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	☐ Unliquidated ☐ Disputed	
Houston TX 77093	_	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Outstanding debt	
No		
Yes		
4.41		\$850.00
HCTRA- Violations	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 4440	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Houston TX 77210-4440		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☑ Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.42		\$1,500.00
Houston Methodist	Last 4 digits of account number	41,000.00
Nonpriority Creditor's Name PO Box 3133	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Houston TX 77253-3133		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Medical bili	
✓ No		
Yes		
4.43		\$20.00
Houston Methodist	Last 4 digits of account number	\$20.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 3133 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Houston TX 77253-3133	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical bill	
Is the claim subject to offset?		
☑ No □ Yes		
4.44		\$1,532.00
Houston Northwest Med	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 740785	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Cincinnatti OH 45274-0785 City State ZIP Code	Toward MONDRIORITY was a sound of a large	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	medical bill	
✓ No		
Yes		

Debtor 1 Debtor 2 Brandon D. French, Sr. Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.45		\$40.00
Houston NW Radiology Assoc.	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 3686 Dept. 467	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Houston TX 77253	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical bill	
Is the claim subject to offset?	Medical bill	
✓ No		
Yes		
4.46		#4 000 00
HSN	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	
PO Box 9090	<u> </u>	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Clearwater FL 33758-9090	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
L les		
4.47		\$3,693.00
Hunter Warfield	Last 4 digits of account number 3 4 9 0	
Nonpriority Creditor's Name 4620 Woodland Corporate	When was the debt incurred? 11/2012	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Tampa FL 33614		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collection Attorney	
No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.48		\$0.00
Imagine/atlanticus	Last 4 digits of account number 1 2 3 9	Ψ0.00
Nonpriority Creditor's Name	When was the debt incurred? 10/2006	
Pob 105555 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Atlanta GA 30348		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No No		
Yes		
4.49		*
	Look Addinite of account number 0 0 0 0	\$616.00
Jefferson Capital Syst Nonpriority Creditor's Name	Last 4 digits of account number 2 0 0 3	
16 Mcleland Rd	When was the debt incurred? 04/2018	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Saint Cloud MN 56303	Disputed	
Saint Cloud MN 56303 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset?		
No Yes		
Yes		
4.50		\$616.00
Jefferson Capital Systems	Last 4 digits of account number	
Nonpriority Creditor's Name 16 McLeland Rd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
St Cloud MN 56303		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? No		
✓ No Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.51		\$4,000.00
Lab Corp	Last 4 digits of account number	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 2240 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Burlington NC 27216		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
No Voc		
Yes		
4.52		\$643.00
Law Office of Joel Cardis LLC	Last 4 digits of account number	40.0.00
Nonpriority Creditor's Name	When was the debt incurred?	
2006 Swede Rd Suite 100 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
E Nouviton DA 40404	Disputed	
E. Norriton PA 19401 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
_	Outstanding debt	
Is the claim subject to offset? No		
✓ NO ☐ Yes		
4.53		\$850.00
Linebarger, Goggan, Blair & Sampson	Last 4 digits of account number	
Nonpriority Creditor's Name 4828 Loop Central Dr. Suite 500	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Houston TX 77081	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collecting for -Tolls	
Is the claim subject to offset?	-	
☑ No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.54		\$2,000.00
Lori Sweitzer OB Gyn	Last 4 digits of account number	
Nonpriority Creditor's Name 2000 Medical Pkwy Ste 310	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Uniquidated ☐ Contingent	
	□ Disputed	
Annapolis MD 21401 City State ZIP Code	Turns of MONIPPIOPITY unaccounted alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Medical bill	
Is the claim subject to offset?		
☑ No ☐ Yes		
Yes		
4.55		\$1,000.00
M and T Bank	Last 4 digits of account number	
Nonpriority Creditor's Name 1 Fountain Plaza 7th Floor	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
D. (()	Disputed	
Buffalo NY 14203 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.56		\$142.00
Marinr Finc	Last 4 digits of account number <u>5</u> <u>4</u> <u>1</u> <u>1</u>	
Nonpriority Creditor's Name 8211 Town Center Dr	When was the debt incurred? 11/01/2013	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Nottingham MD 24226	Disputed	
Nottingham MD 21236 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Secured	
Is the claim subject to offset?		
✓ No □ Yes		

After listing any entries on this page, number them sequentially from the provious page. ST	Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Assignment State	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number Source Street Str		m sequentially from the	Total claim
Nonprison/Cresitor's Name	4.57		\$50.00
Substitute Superior Superio		Last 4 digits of account number	<u>.</u>
Saletimore MD 21264 Contingent Conti		When was the debt incurred?	
Baltimore MD 21264 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Who incurred the debt? Check one. Debtor 1 and Debtor 2 only No Hospital State Debtor 2 only No Hospital State Debtor 2 only Debtor 3 only No Hospital State Debtor 2 only Debtor 4 only Debtor 5 only No Hospital State Debtor 5 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9		As of the date you file, the claim is: Check all that apply.	
Baltimore MD 21264 City State 2/IP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Assay Service As of the date you did not report as a priority claims Debtor 1 only Debtor 2 only Check if this claim is for a community debt is the claim subject to offser? Maryland Heights MO 63043-0629 City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Check if this claim is for a community debt is the claim subject to offser? Maryland Heights MO 63043-0629 City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Acceptable Who incurred the debtors and another with the claim is of a community debt is the claim subject to offser? Memorial Hermann Least 4 digits of account number When was the debt incurred? As of the date you file, the claim is Check all that apply. Debtor 1 only Debtor 2 only Acceptable Who incurred the debtors and another with the claim is community debt is the claim subject to offser? Memorial Hermann Least 0 offser? Memorial Hermann Sireet Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Check all that apply. Debtor 1 only Debtor 2 only Outstanding debt Student loans Sudant loans Outstanding debt Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Type of NONPRIORITY unsecured claim: Sudant loans Outstanding debt Student loans Outstanding debt Student loans Outstanding debt Student loans Outstanding debt Student loans Outstanding debt or dispersion or profit-sharing plans, and other similar debts Outstanding debt Student loans Outstanding debt or dispersion or profit-sharing plans		— —	
Baltimore MD 21264 Cry Who incurred the debt 19th 2 in Code Who incurred the debt 19th 2 in Code Who incurred the debt 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 1 and Debtor 2 only No incurred the debt? Debtor 1 only Debtor 2 only No incurred the debt? Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only D			
Suident loans Suident loa			
Debtor 1 only		Type of NONPRIORITY unsecured claim:	
Debtor 2 only			
Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt is the claim subject to offset? When subject to offset? When was the debt incurred? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Co			
At least one of the debtors and another	<u> </u>		
Is the claim subject to offset? No Yes		• • • • • • • • • • • • • • • • • • • •	
Medicredit Inc Last 4 digits of account number PO Box 1629 Number Street State Zip Code that you file, the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Check one. Debtor 1 and Debtor 2 only Debtor 3 only PO Box 4370 Number Street State Zip Code that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce th	Check if this claim is for a community debt	Outstanding debt	
As Medicredit Inc			
4.58	브 ,		
Medicredit Inc Last 4 digits of account number PO Box 1629 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Nonpriority Creditor's Name PO Box 1629 Number Street Street Contingent Uniquidated Disputed	4.58		\$867.00
Number Street Street Street Street Street Contingent Unliquidated Disputed	Medicredit Inc	Last 4 digits of account number	
Name Street	'_	When was the debt incurred?	
Maryland Heights		As of the date you file, the claim is: Check all that apply.	
Dispute State ZIP Code Check one. Debtor 1 only Debtor 2 only Debtor 2 only Type of NONPRIORITY unsecured claims Debtor 1 and Debtor 2 only Debtor 3 only Debtor 4 one Debtor 4 one Debtor 5 one Debtor 5 one Debtor 6 one Debtor 6 one Debtor 8 one Debtor 9 only Debtor 9 one Debtor 9			
Maryland Heights MO 63043-0629 Check one.			
City	Maryland Heights MO 63043-0629	Disputed	
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 3 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Credit is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is priority claims □ Check if the claim is check and other similar d	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only		Student loans	
Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Is the claim subject to offset? Check if this claim is for a community debt Last 4 digits of account number Nonpriority Creditor's Name PO Box 4370 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NoNPRIORITY unsecured claim: City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? Type of NoNPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill			
At least one of the debtors and another Check if this claim is for a community debt St the claim subject to offset? No	=		
Steel claim subject to offset?			
No Yes State ZIP Code Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No State ZIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim is for a community debt State SIP Code Check of the claim is for a community debt State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim subject to offset? State SIP Code Check of the claim is for a community debt State SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is for a community debt SIP Code Check of the claim is ch			
A.59 Space	Is the claim subject to offset?		
Section Sect			
Memorial Hermann Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred?	Tes .		
Memorial Hermann Nonpriority Creditor's Name PO Box 4370 Number Street Houston City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify ■ Medical bill Medical bill	4.59		\$525.00
Number Street Houston TX 77210-4370 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Memorial Hermann	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Nonpriority Creditor's Name		
Houston TX 77210-4370 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill		As of the date you file, the claim is: Check all that apply.	
Houston TX 77210-4370 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill Medical bill		<u> </u>	
Houston TX 77210-4370 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Medical bill			
City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Other. Specify ■ Medical bill	Houston TX 77210-4370	□ Disputed	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No			
☑ No	Check if this claim is for a community debt		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.60		\$808.00
Mercantile Adjmnt Bur	Last 4 digits of account number 9 7 5 5	
Nonpriority Creditor's Name 165 Lawrence Bell Dr Ste	When was the debt incurred? 06/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	☐ Unliquidated ☐ Disputed	
Buffalo NY 14221 City State ZIP Code	— (NONDRIGHTY)	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Collection Attorney	
✓ No		
Yes		
4.61		4000.00
	Local A district of account number 7 0 2 4	\$896.00
Merrick Bank Corp Nonpriority Creditor's Name	Last 4 digits of account number 7 8 3 4	
Pob 9201	When was the debt incurred? 10/2016	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Old Bethpage NY 11804	Disputed	
Old Bethpage NY 11804 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.62		\$25.00
MHMG Woodlands Card	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
9180 Pinecroft Dr Ste 400 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
Spring TX 77380-9999	Disputed	
City State ZIP Code Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecui	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.63		\$651.00
Midland Funding	_ Last 4 digits of account number _8 _2 _8 _0	
Nonpriority Creditor's Name 2365 Northside Dr Ste 30	When was the debt incurred? 09/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
San Diego CA 92108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Factoring Company Account	
☑ No		
Yes		
4.64		\$394.00
Midland Funding	Last 4 digits of account number 9 0 4 4	
Nonpriority Creditor's Name 2365 Northside Dr Ste 30	When was the debt incurred? 09/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
San Diego CA 92108 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset? ✓ No		
Yes		
4.65		\$198.00
National Recovery Agen	Last 4 digits of account number 7 9 5 7	
Nonpriority Creditor's Name 2491 Paxton St	When was the debt incurred? 01/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
Hamisham BA 47444	Disputed	
Harrisburg PA 17111 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.66		\$112.00
National Recovery Agen	Last 4 digits of account number 7 9 6 0	<u> </u>
Nonpriority Creditor's Name	When was the debt incurred? 03/2013	
2491 Paxton St Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Harrisburg PA 17111		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.67		\$0.00
Navy Federal Cr Union	Last 4 digits of account number1301_	
Nonpriority Creditor's Name Po Box 3700	When was the debt incurred? 04/2008	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Merrifield VA 22119	— — — — — — — — — — — — — — — — — — —	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Unsecured	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.68		\$100.00
PayPal Credit Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 105658	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	Disputed	
Atlanta GA 30348-5658 City State ZIP Code	Type of NONDDIODITY upgeoured eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Outstanding debt	
Is the claim subject to offset?	Outstanding debt	
No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.69		\$252.00
Pediatric Place Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 14000	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Belfast ME 04915	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	•	
☑ No ☐ Yes		
4.70		\$1,064.00
Phoenix Financial Serv Nonpriority Creditor's Name	_ Last 4 digits of account number 3 7 3 7	
8902 Otis Ave Ste 103a	When was the debt incurred? 05/2018	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Indianapolis IN 46216	─	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
✓ Debtor 1 and Debtor 2 only✓ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?		
No You		
Yes		
4.71		\$713.00
Phoenix Financial Serv Nonpriority Creditor's Name	_ Last 4 digits of account number <u>3</u> <u>7</u> <u>3</u> <u>5</u>	
8902 Otis Ave Ste 103a	When was the debt incurred? 05/2018	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Indianapolis IN 46216	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collection Attorney	
☑ No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)					
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page					
After listing any entries on this page, number them sequentially from the previous page.						
4.72		\$300.00				
Planet Fitnes	Last 4 digits of account number					
Nonpriority Creditor's Name 5604 Silver Hill Rd.	When was the debt incurred?					
Number Street	As of the date you file, the claim is: Check all that apply.					
	_ Contingent					
	Unliquidated					
District Heights MD 20747	Disputed					
City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one. Debtor 1 only	Student loans					
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 					
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts					
At least one of the debtors and another	✓ Other. Specify					
☐ Check if this claim is for a community debt	Outstanding debt					
Is the claim subject to offset?						
☑ No □ Yes						
Yes						
4.73		\$8,985.00				
Plaza Servic	Last 4 digits of account number 1 0 0 1					
Nonpriority Creditor's Name	When was the debt incurred? 10/27/2017					
110 Hammond Drive Suite 110 Number Street	As of the date you file, the claim is: Check all that apply.					
	Contingent					
	Unliquidated					
Atlanta GA 30328	Disputed					
City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one.	Student loans					
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce					
Debtor 1 and Debtor 2 only	that you did not report as priority claims					
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					
Check if this claim is for a community debt	Unknown Loan Type					
Is the claim subject to offset?	71					
☑ No						
Yes						
4.74		\$6,566.00				
Plaza Servic	Last 4 digits of account number 5 5 5 0	Ψ0,300.00				
Nonpriority Creditor's Name	Last 4 digits of account number 5 5 5 0 When was the debt incurred? 05/14/2018					
110 Hammond Drive Suite 110						
Number Street	As of the date you file, the claim is: Check all that apply. Contingent					
	Unliquidated					
Atlanta CA 20229	Disputed					
Atlanta GA 30328 City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one.	Student loans					
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce					
Debtor 2 only	that you did not report as priority claims					
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
<u> </u>	Other. Specify					
	Unknown Loan Type					
Is the claim subject to offset? No No						
☐ Yes						

No	Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
A 75 Progressive Leasing Last 4 digits of account number S3,020.00	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Progressive Leasing Last 4 digits of account number		m sequentially from the	Total claim
Progressive Leasing	4.75		\$3.020.00
State Stat	Progressive Leasing	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent UT 84020 Check one. Check on		When was the debt incurred?	
Uniquidated Disputed Disput		As of the date you file, the claim is: Check all that apply.	
Dispute UT 84020 Sinue ZiP Code Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and Debtor		— <u> </u>	
Type of NonPRIORITY unsecured claim:			
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt is the claim subject to offset? Outstanding debt			
Debtor 1 only	•	Type of NONPRIORITY unsecured claim:	
Debtor 2 only			
Debtor 1 and Debtor 2 only			
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check one. Debtor 1 only Nor Yes Ves Ves Ves Ves Check one. Debtor 1 only Sizet ZiP Code Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check if this claim is for a community debt Check one. Debtor 1 only Check one. Chec	<u> </u>		
Is the claim subject to offset? Yes			
Non-	☐ Check if this claim is for a community debt	Outstanding debt	
Ves A.76 Storage Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Disputed Debtor 1 only Debtor 2 only Yes At least one of the debtors and another Ves Check if this claim is for a community debt is the claim subject to offset? When was the debt incurred? Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 3 of the date you file, the claim sing out of a separation agreement or divorce that you did not report as priority claims Debts 10 pension or profit-sharing plans, and other similar debts Other. Specify Outstanding debt Outstanding debt Student loans Student loans Outstanding debt O			
A 76 Public Storage	브 ,		
Public Storage Last 4 digits of account number Nonpriority Creditor's Name 1492 S Clincinnati OH 45274-0698 Number Street Clincinnati OH 45274-0698 Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Obetor 3 Name Clincinnati OH 45274-0698 Check one. Debtor 1 only Debtor 2 only Debtor 2 only Obetor 3 Name Clincinnati OH 45274-0698 Check one. Debtor 4 and Debtor 2 only Debtor 5 Name Obligations arising out of a separation agreement or divorce that you did not report as priority clealms State Zip Code Check if this claim is for a community debt Contingent Obligations arising out of a separation agreement or divorce that you did not report as priority clealms Obligations arising out of a separation agreement or divorce that you did not report as priority clealms Obligations arising out of a separation agreement or divorce that you did not report as priority clealms Obligations arising out of a separation agreement or divorce that you did not report as priority clealms Obligations arising out of a separation agreement or divorce that you did not report as priority clealms Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agreement or divorce Obligations arising out of a separation agr			
Monportly Creditor's Name 1492 S Clinton St Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Disput	4.76		\$600.00
As of the date you file, the claim is: Check all that apply.		Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent		When was the debt incurred?	
Unliquidated Disputed Dispu		As of the date you file, the claim is: Check all that apply.	
Denver CO 80247 City State ZiP Code Who incurred the debt? Check one.			
Debtor 1 contingent			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Nopriority Creditor's Name PO Box 740698 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Type of NoNPRIORITY unsecured claim: Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Denver CO 80247	Disputed	
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 3 and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check Description of the claim subject to offset? □ Check Description of the claim subject to offset? □ Check Description of the claim is for a community debt □ Check one. □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debts to pension or profit-sharing plans, and other similar debts □ Check if this claim is for a community debt □ Check of the claim is check all that apply. □ Contingent □ Continge		Type of NONPRIORITY unsecured claim:	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ As of the debt incurred? □ Check all that apply. □ Contingent □ Unliquidated □ Disputed □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 2 only □ Debtor 4 only □ Debtor 3 only □ Debtor 4 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 6 only □ Debtor 6 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 1 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 6 only □ Debtor 6 only □ Debtor 6 only □ Debtor 7 only □ Debtor 8 only □ Debtor 9 only □ Debtor 9 only □ Debtor 1 only		Student loans	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes 4.77 Quest Diagnostice Inc. Last 4 digits of account number Nonpriority Creditor's Name PO Box 740698 Number Street Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt When was the debt incurred? As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Who as a sparation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Who dical bill	□ D. I. (
At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes 4.77 Quest Diagnostice Inc. Nonpriority Creditor's Name PO Box 740698 Number Street Circinanati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Cotter. Specify Outstanding debt \$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 Check of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill		· · · · · · · · · · · · · · · · · · ·	
Check if this claim is for a community debt			
No			
As of the date you file, the claim is: Check all that apply. Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt \$3,000.00 \$3,000.00 \$3,000.00 \$3,000.00 \$\$ When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Is the claim subject to offset?		
\$3,000.00 Quest Diagnostice Inc. Nonpriority Creditor's Name PO Box 740698 Number Street Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt \$3,000.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill			
Quest Diagnostice Inc. Contingent Conti	l res		
Nonpriority Creditor's Name PO Box 740698 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	4.77		\$3,000.00
Nonpriority Creditor's Name PO Box 740698 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Quest Diagnostice Inc.	Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Nonpriority Creditor's Name	When was the debt incurred?	
Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill		As of the date you file, the claim is: Check all that apply.	
Cincinnati OH 45274-0698 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill			
City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt			
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill	Cincinnati OH 45274-0698	☐ Disputed	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify ■ Medical bill	City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt □ Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt □ Obligations arising out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical bill			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt At least one of the debtors and another Medical bill			
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Medical bill	□ 5 4. 15 5		
☑ Check if this claim is for a community debt Medical bill	At least one of the debtors and another		
Is the claim subject to offset?	Check if this claim is for a community debt		
	Is the claim subject to offset?		
	☑ No ☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)					
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page					
After listing any entries on this page, number them sequentially from the previous page.						
4.78		\$525.00				
QVC	Last 4 digits of account number	Ψ020.00				
Nonpriority Creditor's Name 1010 N Loop 1604 E	When was the debt incurred?					
Number Street	As of the date you file, the claim is: Check all that apply.					
	_ Contingent					
	☐ Unliquidated ☐ Disputed					
San Antonio TX 78232 City State ZIP Code						
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans					
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce					
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims					
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					
☐ Check if this claim is for a community debt	✓ Other. Specify Outstanding debt					
Is the claim subject to offset?	•					
No Voc						
Yes						
4.79		\$282.00				
Receivable Management	Last 4 digits of account number 1 5 9 2					
Nonpriority Creditor's Name Pob 17305	When was the debt incurred? 11/2012					
Number Street	As of the date you file, the claim is: Check all that apply.					
	_ ☐ Contingent ☐ Unliquidated					
	— ☐ Disputed					
Richmond VA 23226 City State ZIP Code	Type of NONDDIODITY upgeoured eleims					
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans					
Debtor 1 only	Obligations arising out of a separation agreement or divorce					
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims					
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					
☐ Check if this claim is for a community debt	Collection Attorney					
Is the claim subject to offset?						
☑ No □ Yes						
4.80		\$187.00				
Receivable Management Nonpriority Creditor's Name	Last 4 digits of account number4744					
Pob 17305	When was the debt incurred? 02/2017					
Number Street	As of the date you file, the claim is: Check all that apply.					
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent					
Dishmand VA 22226	Disputed					
Richmond VA 23226 City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one.	Student loans					
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce					
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
At least one of the debtors and another	Other. Specify					
☐ Check if this claim is for a community debt	Collection Attorney					
Is the claim subject to offset?						
✓ No Yes						

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)					
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page					
After listing any entries on this page, number them sequentially from the previous page.						
4.81		\$1,600.00				
Reliant Energy	Last 4 digits of account number	<u> </u>				
Nonpriority Creditor's Name	When was the debt incurred?					
PO Box 3765 Number Street	As of the date you file, the claim is: Check all that apply.					
	_ Contingent					
	Unliquidated					
Houston TX 77253-3765	Disputed					
City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans					
Debtor 2 only	Obligations arising out of a separation agreement or divorce					
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
At least one of the debtors and another	Other. Specify					
Check if this claim is for a community debt	Utililty Bill					
Is the claim subject to offset?						
☑ No						
Yes						
4.82		\$600.00				
Rent A Center	Last 4 digits of account number					
Nonpriority Creditor's Name	When was the debt incurred?					
5501 Headquarters Drive Number Street	As of the date you file, the claim is: Check all that apply.					
Number Street	_ ☐ Contingent					
	Unliquidated					
Diana TV 75024	Disputed					
Plano TX 75024 City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one.	Student loans					
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce					
Debtor 2 only	that you did not report as priority claims					
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
Check if this claim is for a community debt	Other. Specify					
Is the claim subject to offset?	Outstanding debt					
No						
Yes						
4.83		\$700.00				
Rent A Center Nonpriority Creditor's Name	Last 4 digits of account number					
7722 Ritchie Hwy	When was the debt incurred?					
Number Street	As of the date you file, the claim is: Check all that apply.					
	_ ☐ Contingent ☐ Unliquidated					
	□ Unliquidated □ Disputed					
Glen Burnie MD 21061						
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse					
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts					
At least one of the debtors and another	Other. Specify					
Check if this claim is for a community debt	Outstanding debt					
Is the claim subject to offset?						
☑ No ☐ Yes						

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.84		\$11,239.00
Santander Consumer Usa	Last 4 digits of account number 1 0 0 0	
Nonpriority Creditor's Name Po Box 961245	When was the debt incurred? 02/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Ft Worth TX 76161		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations origing out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Repossession Deficiency	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.85		\$40.00
Specialized Collection System, Inc	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 441508	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Houston TX 77244-1508		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? ✓ No		
☐ Yes		
4.86		\$800.00
State Farm	Last 4 digits of account number	
Nonpriority Creditor's Name 8900 Amberglen Blvd	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	— ☐ Disputed	
Austin TX 78729-1110 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? No No		
☐ Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)				
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page				
After listing any entries on this page, number them sequentially from the previous page.					
4.87		\$3,119.00			
State Of Md/ccu	Last 4 digits of account number 7 4 3 0	Ψο,115.00			
Nonpriority Creditor's Name	When was the debt incurred? 09/2017				
300 W Preston St Ste 503 Number Street	As of the date you file, the claim is: Check all that apply.				
	_ Contingent				
	☐ Unliquidated ☐ ☐ Disputed				
Baltimore MD 21201					
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse				
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts				
At least one of the debtors and another	Other. Specify				
Check if this claim is for a community debt	Collection Attorney				
Is the claim subject to offset? ✓ No					
Yes					
4.00					
4.88		\$3,000.00			
Suntrust Bank Nonpriority Creditor's Name	Last 4 digits of account number				
PO Box 305183	When was the debt incurred?				
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent				
	Unliquidated				
Nashville TN 37230-5183	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one.	Student loans				
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce				
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
At least one of the debtors and another	Other. Specify				
☐ Check if this claim is for a community debt	Outstanding debt				
Is the claim subject to offset?					
☑ No □ Yes					
4.89		\$1,000.00			
Suntrust Bank	Last 4 digits of account number				
Nonpriority Creditor's Name 100 Crain Hwy SW	When was the debt incurred?				
Number Street	As of the date you file, the claim is: Check all that apply.				
	_ Contingent				
	☐ Unliquidated ☐ ☐ Disputed				
Glen Burnie MD 21061 City State ZIP Code	—				
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce				
Debtor 2 only	that you did not report as priority claims				
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
Check if this claim is for a community debt	✓ Other. Specify Outstanding debt Outstan				
Is the claim subject to offset?	Outstanding debt				
No No					
Yes					

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)				
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page				
After listing any entries on this page, number them sequentially from the previous page.					
4.90		\$700.00			
TD Bank	Last 4 digits of account number	<u> </u>			
Nonpriority Creditor's Name 7926 Crain Hwy S	When was the debt incurred?				
Number Street	As of the date you file, the claim is: Check all that apply.				
	_ Contingent				
	Unliquidated				
Glen Burnie MD 21061	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one. Debtor 1 only	Student loans				
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts				
At least one of the debtors and another	✓ Other. Specify				
☐ Check if this claim is for a community debt	Outstanding debt				
Is the claim subject to offset?					
☑ No □ Yes					
Yes					
4.91		\$100.00			
Tower FCU	Last 4 digits of account number	·			
Nonpriority Creditor's Name	When was the debt incurred?				
Number Street	As of the date you file, the claim is: Check all that apply.				
	_ Contingent				
	Unliquidated				
Gambrills MD 21060	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one.	☐ Student loans				
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce				
Debtor 1 and Debtor 2 only	that you did not report as priority claims				
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify				
	Outstanding debt				
Is the claim subject to offset?	-				
✓ No					
Yes					
4.92		\$75.00			
Transworld Sys Inc/51	Last 4 digits of account number 7 2 6 4	Ψ73.00			
Nonpriority Creditor's Name	When was the debt incurred? 10/2013				
500 Virginia Dr Ste 514	As of the date you file, the claim is: Check all that apply.				
Number Street	_ ☐ Contingent				
	Unliquidated				
Ft Washington PA 19034	Disputed				
City State ZIP Code	Type of NONPRIORITY unsecured claim:				
Who incurred the debt? Check one.	Student loans				
Debtor 1 only	Obligations arising out of a separation agreement or divorce				
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims				
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
☐ Check if this claim is for a community debt					
Is the claim subject to offset?	Conconon Attentoy				
✓ No					
Yes					

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.93		\$1,075.00
Transworld System Inc/ Nonpriority Creditor's Name	_ Last 4 digits of account number5945_	
500 Virginia Dr Ste 514	When was the debt incurred? 11/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Fort Washington PA 19034	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? No		
✓ No Yes		
4.94		\$79.00
TX EM-I Med Services PC Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 99034	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Las Vegas NV 89193-9034	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Outstanding debt	
Is the claim subject to offset? ✓ No		
Yes		
4.95		\$0.00
U S Dept Of Ed/gsl/atl	Last 4 digits of account number 1 8 5 2	\$0.00
Nonpriority Creditor's Name	When was the debt incurred? 09/2010	
Po Box 4222 Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
	Unliquidated	
Iowa City IA 52244	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a separation agreement or divorce	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Educational	
No		
Yes		

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French	Case number (if known)					
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page					
After listing any entries on this page, number them sequentially from the previous page.						
4.96		\$475.00				
University of Maryland	Last 4 digits of account number					
Nonpriority Creditor's Name PO Box 64021	When was the debt incurred?					
Number Street	As of the date you file, the claim is: Check all that apply.					
	_ Contingent					
	☐ Unliquidated ☐ ☐ Disputed					
Baltimore MD 21264-4021						
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce					
Debtor 2 only	that you did not report as priority claims					
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts					
At least one of the debtors and another	Other. Specify					
Check if this claim is for a community debt	Medical bill					
Is the claim subject to offset? ✓ No						
Yes						
4.97		\$0.00				
Webbank/fingerhut Nonpriority Creditor's Name	Last 4 digits of account number8277					
6250 Ridgewood Rd	When was the debt incurred? 04/2017					
Number Street	As of the date you file, the claim is: Check all that apply.					
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent					
	Disputed					
Saint Cloud MN 56303 City State ZIP Code						
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:					
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce					
Debtor 2 only	that you did not report as priority claims					
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts					
Check if this claim is for a community debt	Other. Specify					
Is the claim subject to offset?	Charge Account					
No No						
Yes						
4.98						
	Lock A digita of account number 0 4 5 0	\$0.00				
Wf Efs Nonpriority Creditor's Name	Last 4 digits of account number 8 4 5 9					
Po Box 5185	When was the debt incurred? 02/09/2009					
Number Street	As of the date you file, the claim is: Check all that apply. — ☐ Contingent					
	Unliquidated					
Sioux Falls SD 57117	Disputed					
City State ZIP Code	Type of NONPRIORITY unsecured claim:					
Who incurred the debt? Check one.	Student loans					
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce					
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims					
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					
☐ Check if this claim is for a community debt	Educational					
Is the claim subject to offset?						
No No						
☐ Yes						

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Debtor 1 Debtor 2	Brandon D. Neallisha S			Case number (if known)	
Part 2:	Your NO	NPRIC	RITY Unsecur	ed Claims Continuation Page	
After listin	•	n this p	page, number the	n sequentially from the	Total claim
4.99					\$1,500.00
Woodland	ds Emerg Phy	'S		Last 4 digits of account number	
Nonpriority C PO Box 2	reditor's Name			When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
Houston City		TX State	77252-2487 ZIP Code	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: 	
Debtor Debtor Debtor At leas Check	red the debt? 1 only 2 only 1 and Debtor 2 3 one of the debt 3 if this claim is 5 subject to off	tors and	d another	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical bill 	
✓ No Yes	ii subject to on:	oel f			

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Debtor 1 Debtor 2	Brandon D. F Neallisha S. F					(Case	e number (if known)
Part 3:	List Others	to Be	e Notified Abou	ıt a Debt T	hat You A	Already	/ Lis	sted
For ex- credito debts t	ample, if a collect or in Parts 1 or 2, that you listed in	tion ag , then li Parts	gency is trying to dist the collection a	collect from gency here. itional credit	you for a de Similarly, i tors here. If	bt you o f you ha	we i	bbt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for
ACA Reco	very			On which	entry in Pa	rt 1 or P	art 2	2 did you list the original creditor?
76 N Mapl	e Ave, Ste 141 Street			Line	of (Chec	ck one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Ridgewoo City	d	NJ State	07450 ZIP Code	— Last 4 diç —	gits of accou	unt num	ber	
	surance Co			On which	entry in Pa	rt 1 or P	art 2	2 did you list the original creditor?
Name PO Box 89 Number	900 Street			Line	of (Ched	ck one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Elkridge City		MD State	21075-8900 ZIP Code	— Last 4 diç —	gits of accou	unt num	ber	
	ollections Corp)		On which	entry in Pa	rt 1 or P	art 2	2 did you list the original creditor?
Name PO Box 58 Number	36 Street			Line	of (Ched	ck one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Riva City		MD State	21140-0586 ZIP Code	— Last 4 diç —	gits of accou	unt num	ber	
Allstate				On which	entry in Pa	rt 1 or P	art 2	2 did you list the original creditor?
Name PO Box 43 Number	303 Street			Line	of (Ched	ck one):	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Carol Stre	am	IL State	60197 ZIP Code	— Last 4 diç —	gits of accou	unt num	ber	
Allstate				On which	entry in Pa	rt 1 or P	art 2	2 did you list the original creditor?
Name PO Box 35 Number	579 Street			Line	of (Ched	ck one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Akron		ОН	44309-3579	— Last 4 diç	gits of accou	ınt num	ber	
City		State	ZIP Code	_				

	n D. French, a S. French				Case	e number (if known)
Part 3: List O	thers to B	Notified Abo	ut a Debt That	You Already	/ Li:	sted Continuation Page
AMCA Collection A	gency		On which entry	y in Part 1 or F	art :	2 did you list the original creditor?
P.O. Box 1235 Number Street			Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Elmsford City	NY State	10523-0935 ZIP Code	— Last 4 digits of	f account num	ber	
AMCA Collection Ag	gency		On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name 2269 S Saw Mill Riv Number Street	er Rd		Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Elmsford City	NY State	10523 ZIP Code	— Last 4 digits of	f account num	ber	
American Coradius			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name 300 Essjay Rd Ste Number Street	150		Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Williamsville	NY State	14221-8208 ZIP Code	— Last 4 digits of	f account num	ber	
Andalman & Flynn I	PC		On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name 8601 Georgia Ave S Number Street	ite 206		Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Silver Springs	MD State	20910-3496 ZIP Code	— Last 4 digits of	f account num	ber	
Anne Arundel Coun	ty Ef		On which entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
8436 Verterns Hight Number Street	way		Lineof Automobile	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Millersville City	MD State	21108 ZIP Code	— Last 4 digits of	f account num	ber	0 0 0 1
Apelles			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
PO Box 1197 Number Street			Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Westerville City	OH State	43086 ZIP Code	Last 4 digits of	f account num	ber	
Oity	State	ZII OUUE				

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French Case number (if known) Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page On which entry in Part 1 or Part 2 did you list the original creditor? **ARS National Services** of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 463023 Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Escondido** CA 92046-3023 State ZIP Code **Bank of America** On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 2759 Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Jacksonville** FΙ 32203-2759 State ZIP Code **Bay Area Credit Service LLC** On which entry in Part 1 or Part 2 did you list the original creditor? PO Box 468449 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Atlanta** GA 31146 City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? **Bb & T Bankcard** PO Box 1847 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Wilson NC 27894-1847 State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? **BB&T Branch Banking** of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 632 Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Whiteville NC 28472 City ZIP Code **BGE** On which entry in Part 1 or Part 2 did you list the original creditor? PO Box 13070 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Philadelphia 19101-3070 PA

State

ZIP Code

Citv

Debtor 1 Debtor 2	Brandon D. Fre Neallisha S. Fre						Case	e number (if known)
Part 3:	List Others t	o Be	Notified Abou	ut a Debt T	hat \	ou Already	/ Lis	sted Continuation Page
Caine & W	/einer			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
	nard St #100 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Van Nuys City		CA State	91409 ZIP Code	— Last 4 dig —	gits of	account num	ber	
Chase Ba	nk			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 19 Number	9600 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City		T X State	77224-9600 ZIP Code	— Last 4 dig —	gits of	account num	ber	
	nt Outsourcing			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
Po Box 90 Number	904 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Renton City		VA State	98057 ZIP Code	— Last 4 diç —	gits of	account num	ber	
	Resource Manag	ge		On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 22 Number	210 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Southgate City		/II State	48195-4210 ZIP Code	— Last 4 diç —	gits of	account num	ber	
	ntroll, LLC			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 54 Number	16 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Hazlewoo City		/IO State	63042 ZIP Code	— Last 4 diç —	gits of	account num	ber	
Credit On	e Bank			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 60 Number	0500 Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
City of Inc		CA State	91716 ZIP Code	— Last 4 diç —	gits of	account num	ber	

Debtor 1 Debtor 2	Brandon D. French Neallisha S. French				Case	number (if known)
Part 3:	List Others to B	e Notified Abo	ut a Debt Th	at You Already	/ Lis	sted Continuation Page
Crest Fina	ncial		On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
	cenic Pointe Dr., Ste Street	. 350	Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Salt Lake (City UT State	84020 ZIP Code	— Last 4 digit —	s of account num	ber	
	Recovery Corp		On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
Name 8014 Bayb Number	perry Rd Street		Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonvi City	Ile FL State	32256 ZIP Code	— Last 4 digit —	s of account num	ber	
EOS CCA			On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
PO Box 98 Number	31002 Street		Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Boston City	MA State	02298-1002 ZIP Code	— Last 4 digit —	s of account num	ber	
Extra Space	ce Storage		On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
9702 Halls Number	Ferry Rd Street		Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
			— — Last 4 digit	s of account num	ber	
St Louis City	MO State	63136 ZIP Code	_			
Fingerhut			On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
PO Box 29 Number	000 Street		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
St Cloud City	MN State	56395 ZIP Code	— Last 4 digit —	s of account num	ber	
Fitnes Cor	nnection		On which e	ntry in Part 1 or P	Part 2	did you list the original creditor?
PO Box 68 Number	80768 Street		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston	тх	77268	— Last 4 digit	s of account num	ber	
City	State	ZIP Code				

	n D. French, a S. French	Sr.				Case	e number (if known)			
Part 3: List O	thers to Be	Notified Abo	ut a Debt T	hat Y	ou Already	/ Li:	sted Continuation Page			
Golds Gym			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?			
Name 8741 Hospital Dr Number Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Douglasville City	GA State	30134 ZIP Code	— Last 4 dig —	gits of	account num	ber				
Harvest Associates	, Inc.		On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?			
Name 821 Crossbridge Dr Number Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Spring City	TX State	77373 ZIP Code	— Last 4 dig —	gits of	account num	ber				
Harvest Associates	, Inc.		On which	On which entry in Part 1 or Part 2 did you list the original creditor?						
Name 1010 Spring-Cypres Number Street	ss Rd, Box #	±138	Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Spring City	TX State	77373-2503 ZIP Code	— Last 4 dig —	gits of	account num	ber				
Houston Northwest	Medical Ce	enter	On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?			
PO Box 740785 Number Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Houston City	TX State	77914-1535 ZIP Code	— Last 4 dig —	gits of	account num	ber				
Houston Northwest	Medical Ce	nter	On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?			
PO Box 830913 Number Street			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Dallas City	TX State	75284 ZIP Code	— Last 4 dig —	gits of	account num	ber				
Hunter Warfiled			On which	entry	in Part 1 or P	art 2	2 did you list the original creditor?			
3111 W. Dr. Martin I Number Street #200	_uther King	Blvd	Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Tampa City	FL State	33607 ZIP Code	— Last 4 diç —	gits of	account num	ber				

Debtor 1 Debtor 2	Brandon D. French Neallisha S. French				Case	e number (if known)
Part 3:	List Others to B	e Notified Abo	ut a Debt Th	at You Already	y Li:	sted Continuation Page
IRS			On which e	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
	Street, STOP 5024 Street	нои	Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City	TX State	77002 ZIP Code	— Last 4 digit	s of account num	ber	
	leil & Ass, Inc.		On which e	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
	tura Blvd. Suite 100 treet	0	Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Tarzana City	CA State	91356 ZIP Code	— Last 4 digit	s of account num	ber	
	Financial Ser		On which e	ntry in Part 1 or F	art 2	2 did you list the original creditor?
Name 2118 Usher Number S	r St Nw itreet		LineAutomobil	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Covington City	GA State	30014 ZIP Code	— Last 4 digits —	s of account num	ber	5 0 0 2
	, Goggan, Blair et a	l	On which e	ntry in Part 1 or F	Part 2	2 did you list the original creditor?
	Pkwy Ste 104 treet		Line	_of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
San Antoni City	io TX State	78216 ZIP Code	— Last 4 digit	s of account num	ber	
M&T Bank			On which e	ntry in Part 1 or F	art 2	2 did you list the original creditor?
PO Box 62 Number S	182 Street		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Baltimore City	MD State	21264-2182 ZIP Code	— Last 4 digits —	s of account num	ber	
Mariner Fir	nance		On which e	ntry in Part 1 or F	art 2	2 did you list the original creditor?
Name 8211 Town Number S	Center Dr		Line	of (Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Nottinghan		21236	— Last 4 digit	s of account num	ber	
City	State	ZIP Code				

Debtor 1 Debtor 2	Brandon D. Fren Neallisha S. Fren		Case number (if known)	
Part 3:	List Others to	Be Notified	About a Debt That You Already Listed Continuation Page	
Mariner Fi	nance		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name 1650 I oue	tta Rd Suite 200		Line of (Check one):	aims
	Street		Part 2: Creditors with Nonpriority Unsecured	
Carina		77200	Last 4 digits of account number	
Spring City	T)			
МСМ			On which entry in Part 1 or Part 2 did you list the original creditor?	
Name PO Box 30	0		Line of (Check one): Part 1: Creditors with Priority Unsecured Cla	aims
	Street		Part 2: Creditors with Nonpriority Unsecured	
			Last 4 digits of account number	
San Deigo City	C/ Sta			
Oity	316	ate Zii Code		
N.A.R. Name			On which entry in Part 1 or Part 2 did you list the original creditor?	
PO Box 50			Line of (Check one):	aims
Number 3	Street		Part 2: Creditors with Nonpriority Unsecured	d Claims
		40454.054	Last 4 digits of account number	
Linden City	MI Sta		<u></u>	
Nationwid	e Mutual Inrance	Со	On which entry in Part 1 or Part 2 did you list the original creditor?	
Name 1100 Richi	mond Ave, Ste 40	0	Line of (Check one): Part 1: Creditors with Priority Unsecured Cla	aims
Number S	Street		Part 2: Creditors with Nonpriority Unsecured	
			Last 4 digits of account number	
Houston	T			
City	Sta	ate ZIP Code		
NPAS Solu Name	ıtions, LLC		On which entry in Part 1 or Part 2 did you list the original creditor?	
PO Box 33			Line of (Check one): Part 1: Creditors with Priority Unsecured Cla	aims
Number S	Street		Part 2: Creditors with Nonpriority Unsecured	d Claims
			Last 4 digits of account number	
Louisville City	K' Sta			
Pelican Au	ıto.		On which entry in Part 1 or Part 2 did you list the original creditor?	
Name				oimo
	nam St Ste 200 Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claration Automobile Part 2: Creditors with Nonpriority Unsecured	
San Diego	C	A 92123	Last 4 digits of account number <u>0</u> <u>1</u> <u>8</u> <u>7</u>	
City	Sta			

		Sr.			C	Case	e number (if known)
List Others to	в Ве	Notified Abou	ut a Debt Th	at You Al	ready	' Li:	sted Continuation Page
uto Finance L			On which e	entry in Part	1 or P	art 2	2 did you list the original creditor?
ham St Ste 200			Line	of (Check	cone):	П	Part 1: Creditors with Priority Unsecured Claims
Street			Automobil	le	ŕ		Part 2: Creditors with Nonpriority Unsecured Claims
		92123 ZIP Code	— Last 4 digit —	s of accour	nt numk	oer	4 5 4 3
Capital Partners			On which e	entry in Part	1 or Pa	art 2	2 did you list the original creditor?
thampton Rd			Line	of (Check	(one):	П	Part 1: Creditors with Priority Unsecured Claims
Street							Part 2: Creditors with Nonpriority Unsecured Claims
		19154	— Last 4 digit —	s of accour	nt numb	oer	
	ale	ZIF Code	On which e	entry in Part	1 or P	art 2	2 did you list the original creditor?
			_	-			
Street			LINE	_OI (C/Ieck	one).		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
00			_				
<u> </u>		17108-0988	Last 4 digit	s of accour	nt numb	oer	
Sid	ale	ZIF Code					
inancial Services	LLC		On which e	entry in Part	1 or P	art 2	2 did you list the original creditor?
6580			Line	_of (Check	(one):		Part 1: Creditors with Priority Unsecured Claims
Street			_				Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digit	s of accour	nt numb	oer	
_		46226-0580 ZIP Code	_				
Racovary Associa	itas		On which e	entry in Part	1 or P	art 1	2 did you list the original creditor?
•			_	•			,
Street				<u> </u>	(one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
			<u> </u>			Ш	Tare 2. Greaters with Horiphority Chocodica Grains
V	Δ	23541	Last 4 digit	s of accour	nt numb	oer	
		ZIP Code	_				
ve Insurance			On which e	entry in Part	1 or P	art 2	2 did you list the original creditor?
4568			Line	_of (Check	one):		Part 1: Creditors with Priority Unsecured Claims
Street							Part 2: Creditors with Nonpriority Unsecured Claims
			Last 4 digit	s of accour	nt numb	oer	
		44101 ZIP Code					
	List Others to uto Finance L tham St Ste 200 Street Capital Partners thampton Rd Street Mia P. Street Street Street Street Recovery Associated 2914 Street V. Street Ve Insurance 4568 Street	List Others to Be uto Finance L sham St Ste 200 Street Capital Partners thampton Rd Street A State Cinancial Services LLC 6580 Street Recovery Associates 2914 Street VA State ve Insurance 4568 Street	List Others to Be Notified About to Finance L tham St Ste 200 Street Capital Partners thampton Rd Street A 19154 State ZIP Code Cit Corp A 2123 State ZIP Code Capital Partners Champton Rd Street Corp Capital Partners Capi	Neallisha S. French List Others to Be Notified About a Debt Th uto Finance L cham St Ste 200 Street Capital Partners Capital Partners Champton Rd Street Capital Partners Champton Rd Street Capital Partners Con which e Champton Rd Capital Partners Con which e Champton Rd Capital Partners Con which e Capital Partners Collection Capital Partners Con which e Capital Partners Collection Capital Partners Con which e Collection Capital Partners Collection Capital Partners Collection Capital Partners Con which e Collection Capital Partners Capital Pa	List Others to Be Notified About a Debt That You All uto Finance L Cham St Ste 200 Street CA 92123 State ZIP Code Capital Partners Champton Rd Street Chia PA 19154 State ZIP Code Chia PA 19154 State ZIP Code Check BB Champton Rd Check BB Check BB	List Others to Be Notified About a Debt That You Already	List Others to Be Notified About a Debt That You Already Live Finance L On which entry in Part 1 or Part is tham St Ste 200 Line

	D. French, a S. French				Cas	e number (if known)				
Part 3: List O	thers to Be	Notified Abou	ut a Debt Ti	nat You Alread	dy Li	sted Continuation Page				
Progressive Insural	nce		On which entry in Part 1 or Part 2 did you list the original creditor?							
Dept 0583 Number Street			Line	of (Check one,):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Carol Stream	IL State	60132 ZIP Code	— Last 4 digi —	its of account nu	mber					
QVC			On which	entry in Part 1 or	Part	2 did you list the original creditor?				
Name 1356 Enterprise Dr. Number Street			Line	of (Check one,):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
West Chester City	PA State	19380 ZIP Code	— Last 4 dig	its of account nu	mber					
Radius Global Solu	tions LLC		On which	entry in Part 1 or	Part	2 did you list the original creditor?				
7831 Glenroy Rd., S Number Street	Line	of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims						
Minneapolis City	MN State	55439-3132 ZIP Code	— Last 4 dig	its of account nu	mber					
Receivables Manag	ement Sol,	Inc.	On which	entry in Part 1 or	Part	2 did you list the original creditor?				
Name 992 So. Robert St. Number Street			Line	of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
West St. paul	MN State	55118 ZIP Code	— Last 4 dig	its of account nu	mber					
Resort Financial Se	rvices		On which	entry in Part 1 or	Part	2 did you list the original creditor?				
PO Box 93742 Number Street			Line	of (Check one,):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Las Vegas City	NV State	89193-3742 ZIP Code	— Last 4 dig	its of account nu	mber					
Shop NBC			On which	entry in Part 1 or	Part	2 did you list the original creditor?				
Name PO Box 305249 Number Street			Line	of (Check one,):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
Nashville City	TN State	37230-5249 ZIP Code	— Last 4 dig	its of account nu	mber					

Debtor 1 Debtor 2	Brandon D. Frenc Neallisha S. Frenc		Case number (if known)
Part 3:	List Others to	Be Notified Abo	ut a Debt That You Already Listed Continuation Page
Sprint			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 17 Number	7990 Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Cell Phone Bill Part 2: Creditors with Nonpriority Unsecured Claims
Denver City	CO State		— Last 4 digits of account number
Sprint			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 899 Eaton Number	Ave. Street		Lineof (Check one):
Bethlehen City	n PA State	18025-0023 ZIP Code	— Last 4 digits of account number
Name 8501 Lasa	o Cu Of Maryla Ille Rd Street		On which entry in Part 1 or Part 2 did you list the original creditor? Line of (Check one):
Baltimore City	MD State		— Last 4 digits of account number <u>0 6 7 3</u>
Synergeti Name	c Comm		On which entry in Part 1 or Part 2 did you list the original creditor?
1301 E. 3r	d Ave Suite 200 Street		Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Post Falls	ID State	83854 e ZIP Code	— Last 4 digits of account number
TD Bank			On which entry in Part 1 or Part 2 did you list the original creditor?
	108th Ave Street		Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Omaha City	NE State	68154-2631 e ZIP Code	— Last 4 digits of account number
	orth Maine		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 32 Chestn Number	Street		Line of (Check one):
Lewiston City	ME State		— Last 4 digits of account number

	n D. French, a S. French				Case	e number (if known)
Part 3: List O	thers to Be	Notified Abo	ut a Debt That '	You Already	/ Lis	sted Continuation Page
Transworld System	ns Inc		On which entry	/ in Part 1 or F	art 2	2 did you list the original creditor?
PO Box 15393 Number Street			Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Wilmington City	DE State	15393 ZIP Code	— Last 4 digits of —	account num	ber	
Transworld System	ns Inc.		On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
Name 5880 Commerce BI Number Street	vd.	Lineof 	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Rohmert Park City	CA State	94928-1651 ZIP Code	— Last 4 digits of —	account num	ber	
United Acceptance Name 2400 Lake Park Dr Number Street	Inc					2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Smyrna City	GA State	30080 ZIP Code	— Last 4 digits of —	account num	ber	1 3 0 1
United Recovery Sy	ystems Inc		On which entry	in Part 1 or F	art 2	2 did you list the original creditor?
Name PO Box 722929 Number Street			Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City	TX State	77272-2929 ZIP Code	— Last 4 digits of —	account num	ber	
United Recovery S	ystems, Inc.	1	On which entry	y in Part 1 or F	Part 2	2 did you list the original creditor?
Name 3100 S. Gessner, S Number Street	te 400		Lineof	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City	TX State	77063 ZIP Code	— Last 4 digits of —	account num	ber	
UR Furniture			On which entry	y in Part 1 or F	art 2	2 did you list the original creditor?
Name 16747 A North Free Number Street	way		Lineof Outstanding			Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Houston City	TX State	77090 ZIP Code	— Last 4 digits of —	account num	ber	

Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French Case number (if known) Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page **Venture General Agency** On which entry in Part 1 or Part 2 did you list the original creditor? PO Box 1970 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Marble Falls** SD 78654 City State ZIP Code **Verizon Wireless** On which entry in Part 1 or Part 2 did you list the original creditor? Name 3587 Parkway Ln of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 30092-2827 GA **Norcross** State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Wachovia Bank PO Box 96074 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Charlotte NC 28296-0074 State 7IP Code On which entry in Part 1 or Part 2 did you list the original creditor? Wells Fargo of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 10438 Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number IΑ 50306 **Des Moines** State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Wells Fargo Name of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 93399 Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Albuquequer NM 87199-3399 City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Xfinity 9602 S 300 W. Ste B of (Check one): Part 1: Creditors with Priority Unsecured Claims Street Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 84070-3302 Sandy UT

State

ZIP Code

City

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Debtor 1 Debtor 2							Case number (if known)			
Part 3:	List Others to Be Notified About			out a Debt	ut a Debt That You Already Listed Continuation Page					
Xfinity					ch entry	in Part 1 or F	Part 2	2 did you list the original creditor?		
Name One Com	cast Center			Line	of	(Check one):		Part 1: Creditors with Priority Unsecured Claims		
Number Street 1701 JFK Blvd				_	- -			Part 2: Creditors with Nonpriority Unsecured Claims		
	hia	PA	19103	— Last 4 (digits of	account num	ber			
City	IIIa	State	ZIP Code							

Debtor 1	Brandon D. French, Sr.	
Debtor 2	Neallisha S. French	Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

^{6.} Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.	\$3,322.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$3,322.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} -	\$185,213.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$185,213.00

Fill in this in	formation to i	dentify your case	:		
Debtor 1	Brandon	D.	French, Sr.		
	First Name	Middle Name	Last Name		
Debtor 2	Neallisha	S.	French		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	r the: SOUTHERN D	ISTRICT OF TEXA	s	
Case number					
(if known)					k if this is an
				amen	nded filing
Official Form	า 106G				
Schedule G	· Fyecutory	/ Contracts an	d Uneynired I	83888	12/
☐ No. Che	eck this box and fi		ourt with your other so	nedules. You have nothing else to repo are listed on <i>Schedule A/B: Property</i> (C	
is for (for ex	•	cle lease, cell phone)	•	ract or lease. Then state what each of for this form in the instruction booklet for	
Person o	r company with v	whom you have the co	ontract or lease	State what the contract or lease is	s for
2.1 Vaughn	Ramcharitar			Residential lease	
Name Houston				Contract to be ASSUMED	
Number	Street			-	
				-	
				_	
City		State	ZIP Code	•	

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Fill in this inf	ormation to i	dentify your case	:
Debtor 1	Brandon First Name	D. Middle Name	French, Sr.
Debtor 2	Neallisha	S.	French
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	nkruptcy Court fo	r the: SOUTHERN D	ISTRICT OF TEXAS
United States Ba Case number (if known)	nkruptcy Court fo	r the: SOUTHERN D	ISTRICT OF TEXAS

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do y	/ou h No Yes	ave any codebtors?	(If you are filing a	joint case, d	o not list either s	spouse a	as a codebtor.)
2.	inclu	ıde A No.		o, Louisiana, Neva	da, New Mex	ico, Puerto Rico	o, Texas	(Community property states and territories , Washington, and Wisconsin.)
	$\overline{\mathbf{Q}}$	res.	No	iei spouse, oi iega	i equivalent i	ive with you at t	ne ume:	
		M	Yes					
			In which community st	ate or territory did	you live? _	Texas	Fill i	in the name and current address of that person.
			Neallisha S. French	1				
			Name of your spouse, form 2915 Quail Hawk D		quivalent			
			Number Street					
			Houston		TX	77014		
			City		State	ZIP Code		

In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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				· ·	
Fill in this inform	nation to identi	fy your case:			
Debtor 1	Brandon First Name	D. Middle Name	French, Sr. Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	Neallisha First Name	S. Middle Name	French Last Name	An amended filing	
United States Bank Case number (if known)	ruptcy Court for the	SOUTHERN DI	STRICT OF TEXAS	A supplement showing postpetition chapter 13 income as of the following da	ite:
Official Form 10	061			MM / DD / YYYY	
Schedule I: Yo	our Income			12/	15
responsible for suppl include information a	ying correct inforn bout your spouse. f more space is ne	nation. If you are m If you are separate eded, attach a sepa	arried and not filing jointly d and your spouse is not fi rate sheet to this form. On	Debtor 1 and Debtor 2), both are equally y, and your spouse is living with you, filing with you, do not include information n the top of any additional pages, write	

Part 1: Describe Employment

	<u> </u>	,									_
1.	Fill in your employment information.		Debto	or 1			Debtor 2	or non-filing	spous	se	
	If you have more than one job, attach a separate page with information about	Employment status		Employed Not employed				oloyed employed			
	additional employers.	Occupation	ORM	<u> </u>			ER Tech	1			
	Include part-time, seasonal, or self-employed work.	Employer's name	Coca	a Cola			Memoria	al Hermann			
	Occupation may include student or homemaker, if it applies.	Employer's address		er Street			Houstor Number S	•			_
							_				_
			City		State	Zip Code	City	;	State	Zip Code	_
		How long employed th	nere?	10 months		_	<u>1.0</u>	6 years		_	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Deptor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$2,412.15	\$4,300.83
3.	Estimate and list monthly overtime pay.	3. +	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$2,412.15	\$4,300.83

Official Form 106l Schedule I: Your Income page 1

	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French		Case nu	mbei	r (if known)		
				For Debtor 1	F	or Debtor 2 or on-filing spou	se	
	Copy	y line 4 here	4.	\$2,412.15		\$4,300.83	_	
5.		all payroll deductions:		*				
		Tax, Medicare, and Social Security deductions	5a.	\$264.12		\$341.98		
		Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
		Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00		
		Required repayments of retirement fund loans	5d.	\$0.00 \$53.71		\$0.00		
		Insurance	5e.			\$367.77		
		Domestic support obligations	5f.	\$0.00 \$0.00		\$0.00 \$0.00	-	
	•	Union dues Other deductions.	5g.	Ψ0.00		Ψ0.00		
		Specify:	5h. +	\$0.00		\$0.00		
6.	Add 5g +	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$.	6.	\$317.83		\$709.75		
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,094.32		\$3,591.08		
8.	List	all other income regularly received:						
		Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00		
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b.	Interest and dividends	8b.	\$0.00		\$0.00	_	
		Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00	•	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d.	Unemployment compensation	8d.	\$0.00		\$0.00		
	8e.	Social Security	8e.	\$0.00		\$0.00		
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$0.00		\$0.00		
	8g.	Pension or retirement income	8g.	\$0.00		\$0.00		
	8h.	Other monthly income.					•	
		Specify:	. 8h. 🛨	\$0.00		\$0.00		
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00		\$0.00		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,094.32	+	\$3,591.08]=[\$5,685.40
11.		e all other regular contributions to the expenses that you list in S	chedul	le J.				
		ide contributions from an unmarried partner, members of your househ ds or relatives.	old, yo	our dependents, yo	ur ro	ommates, and o	other	
	Do n	ot include any amounts already included in lines 2-10 or amounts tha		ot available to pay	expe	enses listed in S	ched	
	Spec	sify:				11.	+	\$0.00
12.	incor	the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities applies.					l	\$5,685.40 Combined
12	Do 1	ou expect an increase or decrease within the year after you file t	hie for	m?				monthly income
13.	^	No. None.	1101					
	_	Yes. Explain:						
	Ц	103. Explain.						

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F	ill in this inform	ation to identi	fy your case:			Oh a alı	if their in-	
	Debtor 1	Brandon First Name	D. Middle Name	Frenc Last Na	ch, Sr.	│	if this is: n amended filing supplement showing	postpetition
	Debtor 2 (Spouse, if filing)	Neallisha First Name	S. Middle Name	Frenc Last Na		ch	napter 13 expenses a Ilowing date:	
	United States Bankr	uptcy Court for the:	SOUTHERN DI	STRICT O	TEXAS	M	M / DD / YYYY	
	Case number (if known)							
O	fficial Form 10	<u>6J</u>				•		
S	chedule J: Yo	ur Expense	s					12/15
nai	rrect information. If me and case numbe	more space is ne er (if known). Ans	eded, attach anoth wer every question	er sheet to t	ing together, both ar his form. On the top		•	
F	Part 1: Descri	be Your House	hold					
1.	Is this a joint case	?						
	✓ No ☐ Yes	ebtor 2 live in a se	eparate household?		s for Separate Housel	nold of De	ebtor 2.	
2.	Do you have depe		No Yes. Fill out this in		Dependent's relation		Dependent's age	Does dependent live with you?
	Debtor 2.		for each dependen	l	Son		14 years	□ No
	Do not state the de names.	ependents'			Daughter		7 years	- ☑ Yes □ No - ☑ Yes
					Son		4 years	□ No - ☑ Yes □ No
								Yes No Yes
3.	Do your expenses expenses of peop yourself and your	le other than	✓ No ☐ Yes					
	Part 2: Estima	ite Your Ongoi	ng Monthly Exp	enses				
Est	timate your expense	es as of your bank of a date after the	cruptcy filing date u	ınless you a	re using this form as supplemental Sche			
	clude expenses paid th assistance and h		-	-			Your expens	ses
4.			enses for your residence any rent for the grou				4.	\$1,495.00
	If not included in	line 4:						
	4a. Real estate ta	ixes					4a	
	4b. Property, hom	neowner's, or renter	's insurance				4b	\$42.00
	4c. Home mainter	nance, repair, and	upkeep expenses				4c	\$115.00
	4d. Homeowner's	association or con	dominium dues				4d.	

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Debtor 1 Brandon D. French, Sr. Debtor 2 Neallisha S. French Case number (if known) Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$355.00 6b. Water, sewer, garbage collection 6b. \$95.00 6c. Telephone, cell phone, Internet, satellite, and 6c. \$389.00 cable services 6d. 6d. Other. Specify: Food and housekeeping supplies 7. \$1,020.00 Childcare and children's education costs 8. \$275.00 Clothing, laundry, and dry cleaning 9. \$245.00 10. Personal care products and services 10. \$115.00 11. Medical and dental expenses 11. \$225.00 12. Transportation. Include gas, maintenance, bus or train 12. \$420.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13 \$65.00 magazines, and books 14. Charitable contributions and religious donations 14. \$25.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance \$186.00 15c. 15d. Other insurance. Specify: 15d. **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 Vehicle payment 17a. \$340.00 17b. Car payments for Vehicle 2 Vehicle payment (spouse) 17b. \$237.00 17c. Other. Specify: ___ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19.

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	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French	Case number (if known)	
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a	
	20b.	Real estate taxes	20b	
	20c.	Property, homeowner's, or renter's insurance	20c	
	20d.	Maintenance, repair, and upkeep expenses	20d	
	20e.	Homeowner's association or condominium dues	20e	
21.	Other	Specify:	21. +_	
22.	Calcu	alate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a	\$5,644.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2. 22b	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$5,644.00
23.	Calcu	slate your monthly net income.	_	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$5,685.40
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$5,644.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$41.40
24.	Do yo	ou expect an increase or decrease in your expenses within the year after yo	ou file this form?	
		kample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortg		
	V	No.		
	□ `	Yes. Explain here:		

	Brandon	D.	French, Sr.		
	First Name	Middle Name	Last Name		
Debtor 2	Neallisha	S.	French		
Spouse, if filin	g) First Name	Middle Name	Last Name		
Jnited States E	3ankruptcy Court fo	r the: SOUTHERN D	ISTRICT OF TEXAS		
Case number (if known)				☐ Check if amende	this is an d filing
official For	m 106Sum				
ummary	of Your Asse	ets and Liabilit	ies and Certain Statisti	ical Information	12/
	you file your origi		fill out a new Summary and check		oage. Your assets
Schedule A	VB: Property (Officia	al Form 106A/B)			Value of what you ow
		,	/B		\$0.0
та. Обрут	ine 30, Total real es	nate, from Genedale A			
1b. Copy I	ine 62, Total persor	nal property, from Sche	edule A/B		\$17,480.0
1c Convil	ine 63. Total of all r	property on Schedule 4	VB		\$17,480.0
то. Сорут	me oo, rotal or all p	roperty on coneduce r			
Part 2: S	Summarize You	r Liabilities			
					Your liabilities Amount you owe
					,
			Property (Official Form 106D) f claim, at the bottom of the last page	e of Part 1 of Schedule D	¢40.424.0
2a. Copy t	the total you listed in	n Column A, Amount o Have Unsecured Claim			\$10,124.0
2a. Copy t Schedule E 3a. Copy t	the total you listed in the total you listed in the total claims from	n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu	f claim, at the bottom of the last pages (Official Form 106E/F)	e E/F	\$10,124.0
2a. Copy t Schedule E 3a. Copy t	the total you listed in the total you listed in the total claims from	n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu	f claim, at the bottom of the last page is (Official Form 106E/F) ured claims) from line 6e of Schedule	e E/F	\$10,124.0 \$3,322.0 + \$185,213.0
2a. Copy t Schedule E 3a. Copy t 3b. Copy t	the total you listed in E/F: Creditors Who Fine total claims from the total claims from	n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsecu	f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedule secured claims) from line 6j of Schedule	e E/Fdule E/F	\$10,124.0
2a. Copy t Schedule E 3a. Copy t 3b. Copy t	the total you listed in E/F: Creditors Who Fine total claims from the total claims from	n Column A, Amount o Have Unsecured Claim n Part 1 (priority unsect n Part 2 (nonpriority un	f claim, at the bottom of the last pages (Official Form 106E/F) ured claims) from line 6e of Schedule secured claims) from line 6j of Schedule	e E/Fdule E/F	\$10,124.0 \$3,322.0 + \$185,213.0

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$5,644.00

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	btor 1 btor 2	Brandon D. French, Sr. Neallisha S. French	Case number (if known)
F	Part 4:	Answer These Questions for Administrative and Statis	tical Records
6.	Are you	u filing for bankruptcy under Chapters 7, 11, or 13?	
	□ No ✓ Ye	o. You have nothing to report on this part of the form. Check this box and as	submit this form to the court with your other schedules.
7.	What k	ind of debt do you have?	
	far	our debts are primarily consumer debts. Consumer debts are those "incomily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for state our debts are not primarily consumer debts. You have nothing to report as form to the court with your other schedules.	atistical purposes. 28 U.S.C. § 159.
8.		ne Statement of Your Current Monthly Income: Copy your total current Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14	·
9.	Copy tl	ne following special categories of claims from Part 4, line 6 of Schedu	ule E/F:
			Total claim
	From P	art 4 on Schedule E/F, copy the following:	
	9a. Do	omestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
	9b. Ta	xes and certain other debts you owe the government. (Copy line 6b.)	\$3,322.00
	9c. Cla	aims for death or personal injury while you were intoxicated. (Copy line 6c	\$0.00
	9d. Str	udent loans (Copy line 6f.)	\$0.00

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$3,322.00

Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Brandon First Name	D. Middle Name	French, Sr.	_	
Debtor 2	Neallisha	S.	French		
(Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court for	r the: SOUTHERN D	ISTRICT OF TEXAS	_	
Case number (if known)					
()					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you hav or agree to hav someone who i	s NOT an attorney to help you fill out bankruptcy forms?
	s not all altorney to help you his out bank uptey forms:
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,
	Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I hav true and correct.	re read the summary and schedules filed with this declaration and that they are
X /s/ Brandon D. French, Sr.	X /s/ Neallisha S. French
Brandon D. French, Sr., Debtor 1	Neallisha S. French, Debtor 2
Date <u>03/28/2019</u>	Date 03/28/2019
MM / DD / YYYY	MM / DD / YYYY

Debtor 1	ormation to id	dentify your case	•		
i	Brandon		•		
	DIAHUUH	D.	French, Sr.		
Debtor 2	First Name	Middle Name	Last Name		
	Neallisha	S.	French		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Banl	kruptcy Court for	r the: SOUTHERN D	ISTRICT OF TEXAS		
Case number					
(if known)				Check if this is an amended filing	
Official Form	107				
Statement of	Financial	Affairs for Ind	lividuals Filing for Ba	nkruptcy	04/16
Part 1: Give	e Details Abo	out Your Marital S	Status and Where You Live	ed Before	
Married	c urrent marital s	status?			
☐ Not married	t 2 voore hove	vou lived anywhere o			
2. During the last	t 3 years, nave	you lived ally where t	other than where you live now?		
2. During the last			other than where you live now? vears. Do not include where you li	ve now.	
2. During the last No	all of the places y t 8 years, did yo operty states and	you lived in the last 3 you ever live with a spo	vears. Do not include where you li	ve now. nmunity property state or territory? , Nevada, New Mexico, Puerto Rico, Texas,	

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Brandon D. French, Sr. Neallisha S. French		Case nur	mber (if known)	_
Explain the Sources of	Your Income			
the total amount of income you rec	eived from all jobs and all bu	ısinesses, including par	t-time activities.	alendar years?
o es. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
uary 1 of the current year until ou filed for bankruptcy:	✓ Wages, commissions, bonuses, tips	\$8,674.00	Wages, commissions, bonuses, tips	\$12,683.00
	Operating a business		Operating a business	
st calendar year:	₩ages, commissions, bonuses, tips	\$23,894.00	₩ Wages, commissions, bonuses, tips	\$52,155.00
TO December 31, 2018)	Operating a business		Operating a business	
lendar year before that:	Wages, commissions, bonuses, tips	\$23,038.00	₩ Wages, commissions, bonuses, tips	\$35,688.00
to December 31,	Operating a business		Operating a business	
le income regardless of whether that ployment; and other public benefit pambling and lottery winnings. If your 1. ach source and the gross income from	at income is taxable. Examp payments; pensions; rental ir u are in a joint case and you	les of other income are ncome; interest; dividend have income that you re	ds; money collected from la eceived together, list it only	awsuits; royalties;
	Explain the Sources of the total amount of income you recare filing a joint case and you have are filing and lottery winnings. If you are source and the gross income from	Explain the Sources of Your Income Du have any income from employment or from operating a but the total amount of income you received from all jobs and all but are filling a joint case and you have income that you receive togothes. Fill in the details. Debtor 1 Sources of income Check all that apply. Detain 1 Sources of income Check all that apply. Detain 2 Departing a business To December 31, 2018 Wages, commissions, bonuses, tips Operating a business Detain 31, 2017 Operating a business Detain 31, 2018 Operating a business Detain 31, 2018	Explain the Sources of Your Income ou have any income from employment or from operating a business during this ye the total amount of income you received from all jobs and all businesses, including par are filing a joint case and you have income that you receive together, list it only once uses. Fill in the details. Debtor 1	Explain the Sources of Your Income

	otor 1 otor 2	Brandon D. Frenc Neallisha S. Frenc				Case number (if kno	wn)
Р	art 3:	List Certain Pa	yments You M	ade Before	You Filed for Ba	ankruptcy	
6.	Are eith	ner Debtor 1's or Deb	tor 2's debts prin	narily consume	r debts?		
	□ No.			•	umer debts. Consumily, or household po		d in 11 U.S.C. § 101(8) as
		During the 90 days	before you filed fo	or bankruptcy, d	id you pay any credi	tor a total of \$6,425*	or more?
		☐ No. Go to line	7.				
		total amo	unt you paid that c	reditor. Do not	include payments fo	more in one or more r domestic support o attorney for this ban	bligations, such as
		* Subject to adjust	ment on 4/01/19 ar	nd every 3 years	after that for cases	filed on or after the	date of adjustment.
	√ Yes	. Debtor 1 or Debto	or 2 or both have p	orimarily consu	ımer debts.		
		During the 90 days	before you filed fo	or bankruptcy, d	id you pay any credi	tor a total of \$600 or	more?
		☐ No. Go to line	7.				
		creditor.	Do not include pay	ments for dome		re and the total amou ons, such as child su case.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
SK	Enterpr	ises		[]	\$340.00	\$2,658.00	
	ditor's name			— Monthly			 ☑ Car
_	02 Bingl onber Stre			_			☐ Credit card
· · ·	ilboi Oliv	501					Loan repayment
			7 77000				Suppliers or vendors
HO City	uston	T)					Other
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Ve	hicle So	lutions Corp			\$237.00	\$7,466.00	☐ Mortgage
	ditor's name	_		— Monthly			Car
		on Blvd Ste 400					Credit card
เทนก	nber Stre	5 0 1					Loan repayment
<u> </u>				_			Suppliers or vendors
Ke City	y Biscay	/ne FL Sta					Other
		Oil					

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	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French	Case number (if known)
7.	Insiders corpora agent, i	1 year before you filed for bankruptcy, did you make a payment on a conclude your relatives; any general partners; relatives of any general partitions of which you are an officer, director, person in control, or owner of 20 including one for a business you operate as a sole proprietor. 11 U.S.C. § child support and alimony.	ners; partnerships of which you are a general partner; 0% or more of their voting securities; and any managing
	✓ No ☐ Yes	s. List all payments to an insider.	
8.		1 year before you filed for bankruptcy, did you make any payments of ed an insider?	r transfer any property on account of a debt that
	Include	payments on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	s. List all payments that benefited an insider.	
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosu	res
9.	List all	1 year before you filed for bankruptcy, were you a party in any lawsui such matters, including personal injury cases, small claims actions, divorcations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·
	✓ No	s. Fill in the details.	
10.	seized,	1 year before you filed for bankruptcy, was any of your property repo or levied? all that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,
	ك	Go to line 11. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a ts from your accounts or refuse to make a payment because you owe	· · · · · · · · · · · · · · · · · · ·
	✓ No	s. Fill in the details.	
12.		1 year before you filed for bankruptcy, was any of your property in these, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of
	✓ No ☐ Yes		

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	otor 1 otor 2	Brandon E Neallisha		•	Case number (if	known)	
P	art 5:	List Cer	tain G	ifts and Cor	· · · · · · · · · · · · · · · · · · ·	,	
13.					uptcy, did you give any gifts with a total value of more	than \$600 per perso	on?
	✓ No	s. Fill in the o	letails fo	or each gift.			
14.		2 years befo charity?	re you	filed for bankru	uptcy, did you give any gifts or contributions with a to	tal value of more tha	an \$600
	✓ No		letails fo	or each gift or c	ontribution.		
Р	art 6:	List Cer	tain L	osses			
15.		1 year before lisaster, or g	-		otcy or since you filed for bankruptcy, did you lose ar	ything because of th	neft, fire,
	✓ No	s. Fill in the o	letails.				
P	art 7:	List Cer	tain P	ayments or	Transfers		
	Include	any attorney	s, bankı	_	Ikruptcy or preparing a bankruptcy petition? reparers, or credit counseling agencies for services requ	ired for your bankrupt	cy.
	ristophe son Who V	er Todd Mo Vas Paid	rrison,	P.C.	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		thy Street reet				09/13/2018	\$999.00
Ho:	uston		TX State	77008 ZIP Code			
Ema	il or websi	ite address					
Pers	on Who M	Made the Payme	ent, if Not	You			
	acus son Who V	Vas Paid			Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Num	nber Str	reet				3/2019	\$25.00
Ho:	uston		TX State	ZIP Code	.		
	il or websi	ite address					
Doro	on Who N	Made the Payme	nt if Not	Vou			

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	tor 1 tor 2	Brandon D. French, Sr. Neallisha S. French	Case number (if known)
17.	anyone	1 year before you filed for bankruptcy, did you or anyone else acting or who promised to help you deal with your creditors or to make payme include any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	s. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affai	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No ☐ Yes	s. Fill in the details.	
19.	you are	10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No	s. Fill in the details.	
Pá	art 8:	List Certain Financial Accounts, Instruments, Safe Dep	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or , closed, sold, moved, or transferred?	instruments held in your name, or for your
	Include	checking, savings, money market, or other financial accounts; certificates, pension funds, cooperatives, associations, and other financial institutions	•
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankrupt urities, cash, or other valuables?	cy, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	Have ye	ou stored property in a storage unit or place other than your home wit	hin 1 year before you filed for bankruptcy?
	_	s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	9
23.	-	hold or control any property that someone else owns? Include any p in trust for someone.	roperty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

	otor 1 otor 2		Brandon D. French, Sr. Neallisha S. French Ca	ase number (if known)
P	art 1	0:	Give Details About Environmental Information	
For	the p	urpo	pose of Part 10, the following definitions apply:	
ı	hazar	dous	mental law means any federal, state, or local statute or regulation concerrus or toxic substance, wastes, or material into the air, land, soil, surface was statutes or regulations controlling the cleanup of these substances, was	rater, groundwater, or other medium,
			ns any location, facility, or property as defined under any environmental lor used to own, operate, or utilize it, including disposal sites.	aw, whether you now own, operate, or
			us material means anything an environmental law defines as a hazardous ce, hazardous material, pollutant, contaminant, or similar item.	waste, hazardous substance, toxic
Rep	ort a	ll no	otices, releases, and proceedings that you know about, regardless of whe	n they occurred.
24.	Has law?	-	y governmental unit notified you that you may be liable or potentially liabl	e under or in violation of an environmental
		No Yes.	s. Fill in the details.	
25.		-	ou notified any governmental unit of any release of hazardous material?	
			s. Fill in the details.	
26.	Have orde	-	ou been a party in any judicial or administrative proceeding under any en	rironmental law? Include settlements and
	ب	No Yes.	s. Fill in the details.	
P	art 1	1:	Give Details About Your Business or Connections to Any	Business
27.	With busi		4 years before you filed for bankruptcy, did you own a business or have a ss?	ny of the following connections to any
			A sole proprietor or self-employed in a trade, profession, or other activity, eith A member of a limited liability company (LLC) or limited liability partnership (I A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation	
	كا		None of the above applies. Go to Part 12. S. Check all that apply above and fill in the details below for each business.	
28.			2 years before you filed for bankruptcy, did you give a financial statement ncial institutions, creditors, or other parties.	to anyone about your business? Include
	_	No Yes.	s. Fill in the details below.	

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Debtor 1 Debtor 2	Brandon D. French, Sr. Neallisha S. French	Case number (if known)
D 440		Case Humber (ii known)
Part 12	Sign Below	
that answe	ers are true and correct. I understar	nancial Affairs and any attachments, and I declare under penalty of perjury I that making a false statement, concealing property, or obtaining money or tcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,
X /s/ Bra	ndon D. French, Sr.	X /s/ Neallisha S. French
Brando	n D. French, Sr., Debtor 1	Neallisha S. French, Debtor 2
Date _	03/28/2019	Date03/28/2019
Did you at	tach additional pages to Your Stater	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pa	ay or agree to pay someone who is r	ot an attorney to help you fill out bankruptcy forms?
√ No		
	Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	Brandon	D.	French, Sr.
	First Name	Middle Name	Last Name
Debtor 2	Neallisha	S.	French
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court for	the: SOUTHERN D	ISTRICT OF TEXAS
(if known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1.	fill in the information below.				
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		

property that secures a debt? Creditor's **SK Enterprises** Surrender the property. No name: Retain the property and redeem it. Yes Retain the property and enter into a \mathbf{V} Description of 2005 Honda Accord Reaffirmation Agreement. property Retain the property and [explain]: securing debt:

Creditor's Vehicle Solutions Corp
name:

□ Surrender the property.
□ Retain the property and redeem it.
□ Retain the property and enter into a Reaffirmation Agreement.
□ Reaffirmation Agreement.

securing debt:

Retain the property and [explain]:

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Debtor 1	Brandon D. French, Sr.				
Debtor 2	Neallisha S. French		Case num	ber (if known)	
Part 2:	List Your Unexpired Pers	onal Property	y Leases		
fill in the i	nexpired personal property lease th information below. Do not list real e I. You may assume an unexpired pe	state leases. <i>U</i>	nexpired leases are leases that a	are still in effect;	the lease period has not
Desc	ribe your unexpired personal prope	rty leases		Wi	II this lease be assumed?
	_			<u> </u>	No Yes
Under	penalty of perjury, I declare that I had property that is subject to an und		y intention about any property o	f my estate that :	secures a debt and
X /s/ Bra	andon D. French, Sr.	X <u>/s/</u> N	leallisha S. French		
Brando	on D. French, Sr., Debtor 1	Neal	lisha S. French, Debtor 2		
	03/28/2019	Date	03/28/2019		
	MM / DD / YYYY		MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

ŀ		filing fee administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

+		filing fee administrative fee	
	\$310	total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Bankruptcy/Ba$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

In re	Brandon D. French, Sr.	Case No.	
	Neallisha S. French		
		Chapter	7

	DISCLOSURE OF COMPENSATIO	N OF ATTORNEY	FOR DEBTOR
1.	. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I depend that compensation paid to me within one year before the filing a services rendered or to be rendered on behalf of the debtor(s) is as follows:	of the petition in bankrupt	cy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	Fixed Fee:	\$999.00
	Prior to the filing of this statement I have received		\$999.00
	Balance Due		\$0.00
2.	. The source of the compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
3.	. The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	 I have not agreed to share the above-disclosed compensa associates of my law firm. 	ation with any other perso	n unless they are members and
	I have agreed to share the above-disclosed compensation associates of my law firm. A copy of the agreement, toget compensation, is attached.		
5.	. In return for the above-disclosed fee, I have agreed to render I	egal service for all aspec	ts of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering adbankruptcy;	vice to the debtor in dete	rmining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements	of affairs and plan which	n may be required;
	c. Representation of the debtor at the meeting of creditors and	I confirmation hearing, ar	nd any adjourned hearings thereof;

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52030	топп	20301	1 (12/13)	,

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/28/2019 /s/ Christopher Morrison

Date Christopher Morrison

Christopher Todd Morrison, P.C. 1306 Dorothy Street

Phone: (713) 863-1001 / Fax: (713) 863-0024

Bar No. 24010250

/s/ Brandon D. French, Sr. /s/ Neallisha S. French

Houston, TX 77008

Brandon D. French, Sr.

Neallisha S. French

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

IN RE: Brandon D. French, Sr.
Neallisha S. French

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

	•	e attached	list of creditors is true and correct to the best of his/her
know	ledge.		
Date	3/28/2019	Signature	/s/ Brandon D. French, Sr.
		J	Brandon D. French, Sr.
Date	3/28/2019	Signature	/s/ Neallisha S. French

Neallisha S. French

ACA Recovery 76 N Maple Ave, Ste 141 Ridgewood, NJ 07450

Accounts Clearing House PO Box 2373 Glen Burnie, MD 21060

Ace 1231 Greenway Dr Ste 700 Irving, TX 75038

ADT Alarm PO Box 371490 Pittsburgh, PA 15250

Agency Insurance Co PO Box 8900 Elkridge, MD 21075-8900

AIC PO Box 8900 Elkridge, MD 21075

Alacrity Collections Corp PO Box 586 Riva, MD 21140-0586

Allstate PO Box 3579 Akron, OH 44309-3579

Allstate PO Box 4303 Carol Stream, IL 60197 AMCA Collection Agency 2269 S Saw Mill River Rd Elmsford, NY 10523

AMCA Collection Agency P.O. Box 1235 Elmsford, NY 10523-0935

American Coradius 300 Essjay Rd Ste 150 Williamsville, NY 14221-8208

American Credit Accept 961 E Main St Spartanburg, SC 29302

Andalman & Flynn PC 8601 Georgia Ave Ste 206 Silver Springs, MD 20910-3496

Anne Arundel County Ef 8436 Verterns Highway Millersville, MD 21108

Anne Arundel Med Ctr 2001 Medical Pkwy Annapolis, MD 21401

Apelles PO Box 1197 Westerville, OH 43086

ARS National Services PO Box 463023 Escondido, CA 92046-3023 Baltimore Washing FCU 301 Hospital Dr Glen Burnie, MD 21060

Bank of America PO Box 2759 Jacksonville, FL 32203-2759

Bank of America 7206 Ritchie Hwy Glen Burnie, MD 21061

Bay Area Credit Service LLC PO Box 468449 Atlanta, GA 31146

Bay County Financial 6619 Ritchie Hwy Glen Burnie, MD 21061

Bb & T Bankcard PO Box 1847 Wilson, NC 27894-1847

BB&T Branch Banking PO Box 632 Whiteville, NC 28472

BGE PO Box 13070 Philadelphia, PA 19101-3070

Caine & Weiner 15025 Oxnard St #100 Van Nuys, CA 91409 Caine Weiner Po Box 55848 Sherman Oaks, CA 91413

Capital One Po Box 30281 Salt Lake City, UT 84130

Capital One Auto Finan 3901 Dallas Pkwy Plano, TX 75093

Care First Blue Cross PO Box 79749 Baltimore, MD 21279

Cash Net 200 W. Jackson Blvd. 14th Floor Chicago, IL 60606-6941

Cash Net 175 West Jackson Suite 1000 Chicago, IL 60604

Ces/dept Of Ed C/o Acs Utica, NY 13501

Chase Bank PO Box 19600 Houston, TX 77224-9600

Chase Card P.o. Box 15298 Wilmington, DE 19850 Comcast PO Box 660618 Dallas, TX 75266-0618

Convergent Outsourcing 800 Sw 39th St Renton, WA 98057

Convergent Outsourcing Po Box 9004 Renton, WA 98057

Credence Resource Manage PO Box 2210 Southgate, MI 48195-4210

Credit Controll, LLC PO Box 546 Hazlewood, MO 63042

Credit One Bank PO Box 60500 City of Industry, CA 91716

Credit One Bank Na Po Box 98875 Las Vegas, NV 89193

Credit Protection Asso 13355 Noel Rd Ste 2100 Dallas, TX 75240

Crest Financial 15 West Scenic Pointe Dr., Ste. 350 Salt Lake City, UT 84020 CSAA General Insurance 3055 OAK ROAD WALNUT CREEK, CA 94597

Dept Of Education/neln 3015 Parker Rd Aurora, CO 80014

Direct TV PO Box 105261 Atlanta, GA 30348-5261

Diversified Consultants, Inc. PO Box 1391 Southgate, MI 48195-0391

Don's Auto World 15404 Kuhkendahl Rd Houston, TX 77090

Enhances Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Eos Cca Po Box 981008 Boston, MA 02298

EOS CCA PO Box 567 Norwell, MA 02061-0567

EOS CCA PO Box 981002 Boston, MA 02298-1002 Extra Space Storage 9702 Halls Ferry Rd St Louis, MO 63136

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Fedloan Po Box 60610 Harrisburg, PA 17106

Fingerhut PO Box 2900 St Cloud, MN 56395

First Credit Services, Inc. 371 Hoes Lane, Suite 300 B Piscataway, NJ 08854

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Fitnes Connection PO Box 680768 Houston, TX 77268

FM 1960 Emergency Phys Phoenix Fin PO Box 98818 Las Vegas, NV 89193

Gerber Life Insurance 445 State St Freemont, MI 49412 Gold's Gym 7900 Ritchie Hwy Ste 129C Glen Burnie, MO 21061

Golds Gym 8741 Hospital Dr Douglasville, GA 30134

Harris County Alarm Detail 9418 Jensen Dr. Ste A Houston, TX 77093

Harvest Associates, Inc. 1010 Spring-Cypress Rd, Box #138 Spring, TX 77373-2503

Harvest Associates, Inc. 821 Crossbridge Dr Spring, TX 77373

HCTRA- Violations Dept 1 PO Box 4440 Houston, TX 77210-4440

Houston Methodist PO Box 3133 Houston, TX 77253-3133

Houston Northwest Med PO Box 740785 Cincinnatti, OH 45274-0785

Houston Northwest Medical Center PO Box 830913 Dallas, TX 75284 Houston Northwest Medical Center PO Box 740785 Houston, TX 77914-1535

Houston NW Radiology Assoc. PO Box 3686 Dept. 467 Houston, TX 77253

HSN PO Box 9090 Clearwater, FL 33758-9090

Hunter Warfield 4620 Woodland Corporate Tampa, FL 33614

Hunter Warfiled 3111 W. Dr. Martin Luther King Blvd #200 Tampa, FL 33607

Imagine/atlanticus
Pob 105555
Atlanta, GA 30348

IRS Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346

IRS 1919 Smith Street, STOP 5024 HOU Houston, TX 77002

Jefferson Capital Syst 16 Mcleland Rd Saint Cloud, MN 56303 Jefferson Capital Systems 16 McLeland Rd St Cloud, MN 56303

Jonathan Neil & Ass, Inc. 18321 Ventura Blvd. Suite 1000 Tarzana, CA 91356

Lab Corp PO Box 2240 Burlington, NC 27216

Law Office of Joel Cardis LLC 2006 Swede Rd Suite 100 E. Norriton, PA 19401

Lendmark Financial Ser 2118 Usher St Nw Covington, GA 30014

Linebarger, Goggan, Blair & Sampson 4828 Loop Central Dr. Suite 500 Houston, TX 77081

Linebarger, Goggan, Blair et al 900 Arion Pkwy Ste 104 San Antonio, TX 78216

Lori Sweitzer OB Gyn 2000 Medical Pkwy Ste 310 Annapolis, MD 21401

M and T Bank 1 Fountain Plaza 7th Floor Buffalo, NY 14203 M&T Bank PO Box 62182 Baltimore, MD 21264-2182

Mariner Finance 1650 Louetta Rd Suite 200 Spring, TX 77388

Mariner Finance 8211 Town Center Dr Nottingham, MD 21236

Marinr Finc 8211 Town Center Dr Nottingham, MD 21236

Maryland Primary Care Phys PO Box 62676 Baltimore, MD 21264

MCM PO Box 300 San Deigo, CA 92108

Medicredit Inc PO Box 1629 Maryland Heights, MO 63043-0629

Memorial Hermann PO Box 4370 Houston, TX 77210-4370

Mercantile Adjmnt Bur 165 Lawrence Bell Dr Ste Buffalo, NY 14221 Merrick Bank Corp Pob 9201 Old Bethpage, NY 11804

MHMG Woodlands Card 9180 Pinecroft Dr Ste 400 Spring, TX 77380-9999

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

N.A.R. PO Box 505 Linden, MI 48451-0505

National Recovery Agen 2491 Paxton St Harrisburg, PA 17111

Nationwide Mutual Inrance Co 1100 Richmond Ave, Ste 400 Houston, TX 77042

Navy Federal Cr Union Po Box 3700 Merrifield, VA 22119

NPAS Solutions, LLC PO Box 33188 Louisville, KY 40232

PayPal Credit PO Box 105658 Atlanta, GA 30348-5658 Pediatric Place PO Box 14000 Belfast, ME 04915

Pelican Auto 9444 Farnham St Ste 200 San Diego, CA 92123

Pelican Auto Finance L 9444 Farnham St Ste 200 San Diego, CA 92123

Pendrick Capital Partners 2810 Southampton Rd Philadelphia, PA 19154

Penn Credit Corp 916 S 14th PO Box 988 Harrisburg, PA 17108-0988

Phoenix Financial Serv 8902 Otis Ave Ste 103a Indianapolis, IN 46216

Phoenix Financial Services LLC PO Box 26580 Indianapolis, IN 46226-0580

Planet Fitnes 5604 Silver Hill Rd. District Heights, MD 20747

Plaza Servic 110 Hammond Drive Suite 110 Atlanta, GA 30328 Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541

Progressive Insurance Dept 0583 Carol Stream, IL 60132

Progressive Insurance PO Box 94568 Cleveland, OH 44101

Progressive Leasing 256 West Data Dr Draper, UT 84020

Public Storage 1492 S Clinton St Denver, CO 80247

Quest Diagnostice Inc. PO Box 740698 Cincinnati, OH 45274-0698

QVC 1356 Enterprise Dr. West Chester, PA 19380

QVC 1010 N Loop 1604 E San Antonio, TX 78232

Radius Global Solutions LLC 7831 Glenroy Rd., Ste Suite 250-A Minneapolis, MN 55439-3132 Receivable Management Pob 17305 Richmond, VA 23226

Receivables Management Sol, Inc. 992 So. Robert St. West St. paul, MN 55118

Reliant Energy PO Box 3765 Houston, TX 77253-3765

Rent A Center 5501 Headquarters Drive Plano, Texas 75024

Rent A Center 7722 Ritchie Hwy Glen Burnie, MD 21061

Resort Financial Services PO Box 93742 Las Vegas, NV 89193-3742

Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161

Shop NBC PO Box 305249 Nashville, TN 37230-5249

SK Enterprises 5202 Bingle Rd Houston, TX 77092 Specialized Collection System, Inc PO Box 441508 Houston, TX 77244-1508

Sprint 899 Eaton Ave. Bethlehem, PA 18025-0023

Sprint PO Box 17990 Denver, CO 80217-0990

State Emp Cu Of Maryla 8501 Lasalle Rd Baltimore, MD 21204

State Farm 8900 Amberglen Blvd Austin, TX 78729-1110

State Of Md/ccu 300 W Preston St Ste 503 Baltimore, MD 21201

Suntrust Bank PO Box 305183 Nashville, TN 37230-5183

Suntrust Bank 100 Crain Hwy SW Glen Burnie, MD 21061

Synergetic Comm 1301 E. 3rd Ave Suite 200 Post Falls, ID 83854 TD Bank 200 South 108th Ave Omaha, NE 68154-2631

TD Bank 7926 Crain Hwy S Glen Burnie, MD 21061

Td Banknorth Maine 32 Chestnut St Lewiston, ME 04240

Tower FCU 1077 MO 3 Gambrills, MD 21060

Transworld Sys Inc/51 500 Virginia Dr Ste 514 Ft Washington, PA 19034

Transworld System Inc/ 500 Virginia Dr Ste 514 Fort Washington, PA 19034

Transworld Systems Inc PO Box 15393 Wilmington, DE 15393

Transworld Systems Inc. 5880 Commerce Blvd. Rohmert Park, CA 94928-1651

TX EM-I Med Services PC PO Box 99034 Las Vegas, NV 89193-9034 U S Dept Of Ed/gsl/atl Po Box 4222 Iowa City, IA 52244

United Acceptance Inc 2400 Lake Park Dr Smyrna, GA 30080

United Recovery Systems Inc PO Box 722929 Houston, TX 77272-2929

United Recovery Systems, Inc. 3100 S. Gessner, Ste 400 Houston, TX 77063

University of Maryland PO Box 64021 Baltimore, MD 21264-4021

UR Furniture 16747 A North Freeway Houston, TX 77090

Vaughn Ramcharitar Houston TX

Vehicle Solutions Corp 104 Crandon Blvd Ste 400 Key Biscayne, FL 33149

Venture General Agency PO Box 1970 Marble Falls, SD 78654 Verizon Wireless 3587 Parkway Ln Norcross, GA 30092-2827

Wachovia Bank PO Box 96074 Charlotte, NC 28296-0074

Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303

Wells Fargo PO Box 93399 Albuquequer, NM 87199-3399

Wells Fargo PO Box 10438 Des Moines, IA 50306

Wf Efs Po Box 5185 Sioux Falls, SD 57117

Woodlands Emerg Phys PO Box 2487 Houston, TX 77252-2487

Xfinity One Comcast Center 1701 JFK Blvd Philadelphia, PA 19103

Xfinity 9602 S 300 W. Ste B Sandy, UT 84070-3302 Christopher Morrison, Bar No. 24010250 Christopher Todd Morrison, P.C. 1306 Dorothy Street Houston, TX 77008 (713) 863-1001 Attorney for the Petitioner

UNITED STATES BANKRUPTCY COURT FOR THE

SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

Numbered Listing of Creditors

n re: Case No.:

Brandon D. French, Sr.SSN:xxx-xx-8921Neallisha S. FrenchSSN:xxx-xx-6356Debtor(s)Numbered Listing of Credite

Address:

2915 Quail Hawk Dr. Chapter: 7

Houston, TX 77014

	Creditor name and mailing address	Category of claim	Amount of claim
1.	ACA Recovery 76 N Maple Ave, Ste 141 Ridgewood, NJ 07450	Unsecured Claim	\$0.00
2.	Accounts Clearing House PO Box 2373 Glen Burnie, MD 21060	Unsecured Claim	\$406.00
3.	Ace 1231 Greenway Dr Ste 700 Irving, TX 75038	Unsecured Claim	\$1,000.00
4.	ADT Alarm PO Box 371490 Pittsburgh, PA 15250	Unsecured Claim	\$1,397.00
5.	Agency Insurance Co PO Box 8900 Elkridge, MD 21075-8900	Unsecured Claim	\$0.00
6.	AIC PO Box 8900 Elkridge, MD 21075	Unsecured Claim	\$800.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
7.	Alacrity Collections Corp PO Box 586 Riva, MD 21140-0586	Unsecured Claim	\$0.00
8.	Allstate PO Box 3579 Akron, OH 44309-3579	Unsecured Claim	\$0.00
9.	Allstate PO Box 4303 Carol Stream, IL 60197	Unsecured Claim	\$0.00
10.	AMCA Collection Agency 2269 S Saw Mill River Rd Elmsford, NY 10523	Unsecured Claim	\$0.00
11.	AMCA Collection Agency P.O. Box 1235 Elmsford, NY 10523-0935	Unsecured Claim	\$0.00
12.	American Coradius 300 Essjay Rd Ste 150 Williamsville, NY 14221-8208	Unsecured Claim	\$0.00
13.	American Credit Accept 961 E Main St Spartanburg, SC 29302 47200154790841001	Unsecured Claim	\$7,397.00
14.	Andalman & Flynn PC 8601 Georgia Ave Ste 206 Silver Springs, MD 20910-3496	Unsecured Claim	\$0.00
15.	Anne Arundel County Ef 8436 Verterns Highway Millersville, MD 21108 158300001	Unsecured Claim	\$0.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
16.	Anne Arundel Med Ctr 2001 Medical Pkwy Annapolis, MD 21401	Unsecured Claim	\$10,100.00
17.	Apelles PO Box 1197 Westerville, OH 43086	Unsecured Claim	\$0.00
18.	ARS National Services PO Box 463023 Escondido, CA 92046-3023	Unsecured Claim	\$0.00
19.	Baltimore Washing FCU 301 Hospital Dr Glen Burnie, MD 21060	Unsecured Claim	\$100.00
20.	Bank of America PO Box 2759 Jacksonville, FL 32203-2759	Unsecured Claim	\$0.00
21.	Bank of America 7206 Ritchie Hwy Glen Burnie, MD 21061	Unsecured Claim	\$2,000.00
22.	Bay Area Credit Service LLC PO Box 468449 Atlanta, GA 31146	Unsecured Claim	\$0.00
23.	Bay County Financial 6619 Ritchie Hwy Glen Burnie, MD 21061	Unsecured Claim	\$3,000.00
24.	Bb & T Bankcard PO Box 1847 Wilson, NC 27894-1847	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
25.	BB&T Branch Banking PO Box 632 Whiteville, NC 28472	Unsecured Claim	\$0.00
26.	BGE PO Box 13070 Philadelphia, PA 19101-3070	Unsecured Claim	\$0.00
27.	Caine & Weiner 15025 Oxnard St #100 Van Nuys, CA 91409	Unsecured Claim	\$0.00
28.	Caine Weiner Po Box 55848 Sherman Oaks, CA 91413 12713160	Unsecured Claim	\$606.00
29.	Capital One Po Box 30281 Salt Lake City, UT 84130 5178057861304751	Unsecured Claim	\$960.00
30.	Capital One Po Box 30281 Salt Lake City, UT 84130 5178058841384160	Unsecured Claim	\$500.00
31.	Capital One Po Box 30281 Salt Lake City, UT 84130 5178057754003882	Unsecured Claim	\$478.00
32.	Capital One Auto Finan 3901 Dallas Pkwy Plano, TX 75093 62062116081071001	Unsecured Claim	\$20,309.00
33.	Care First Blue Cross PO Box 79749 Baltimore, MD 21279	Unsecured Claim	\$100.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
34.	Cash Net 200 W. Jackson Blvd. 14th Floor Chicago, IL 60606-6941	Unsecured Claim	\$655.00
35.	Cash Net 175 West Jackson Suite 1000 Chicago, IL 60604	Unsecured Claim	\$785.00
36.	Ces/dept Of Ed C/o Acs Utica, NY 13501 2133563561	Unsecured Claim	\$0.00
37.	Chase Bank PO Box 19600 Houston, TX 77224-9600	Unsecured Claim	\$0.00
38.	Chase Card P.o. Box 15298 Wilmington, DE 19850 4266841114085556	Unsecured Claim	\$0.00
39.	Comcast PO Box 660618 Dallas, TX 75266-0618	Unsecured Claim	\$800.00
40.	Convergent Outsourcing 800 Sw 39th St Renton, WA 98057 32720397	Unsecured Claim	\$1,191.00
41.	Convergent Outsourcing Po Box 9004 Renton, WA 98057	Unsecured Claim	\$0.00
42.	Credence Resource Manage PO Box 2210 Southgate, MI 48195-4210	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
43.	Credit Controll, LLC PO Box 546 Hazlewood, MO 63042	Unsecured Claim	\$0.00
44.	Credit One Bank PO Box 60500 City of Industry, CA 91716	Unsecured Claim	\$0.00
45.	Credit One Bank Na Po Box 98875 Las Vegas, NV 89193 4447962165287511	Unsecured Claim	\$0.00
46.	Credit Protection Asso 13355 Noel Rd Ste 2100 Dallas, TX 75240 22384346	Unsecured Claim	\$829.00
47.	Crest Financial 15 West Scenic Pointe Dr., Ste. 350 Salt Lake City, UT 84020	Unsecured Claim	\$0.00
48.	CSAA General Insurance 3055 OAK ROAD WALNUT CREEK, CA 94597	Unsecured Claim	\$500.00
49.	Dept Of Education/neln 3015 Parker Rd Aurora, CO 80014 900000519318023	Unsecured Claim	\$9,552.00
50.	Dept Of Education/neln 3015 Parker Rd Aurora, CO 80014 900000519317923	Unsecured Claim	\$7,924.00
51.	Direct TV PO Box 105261 Atlanta, GA 30348-5261	Unsecured Claim	\$674.00

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	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
52.	Diversified Consultants, Inc. PO Box 1391 Southgate, MI 48195-0391	Unsecured Claim	\$674.00	
53.	Don's Auto World 15404 Kuhkendahl Rd Houston, TX 77090	Unsecured Claim	\$2,500.00	
54.	Enhances Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256	Unsecured Claim	\$0.00	
55.	Eos Cca Po Box 981008 Boston, MA 02298 10504149	Unsecured Claim	\$2,456.00	
56.	EOS CCA PO Box 567 Norwell, MA 02061-0567	Unsecured Claim	\$2,456.00	
57.	EOS CCA PO Box 981002 Boston, MA 02298-1002	Unsecured Claim	\$0.00	
58.	Extra Space Storage 9702 Halls Ferry Rd St Louis, MO 63136	Unsecured Claim	\$0.00	
59.	Fed Loan Serv Po Box 60610 Harrisburg, PA 17106 1609235362FD00002	Unsecured Claim	\$23,655.00	
60.	Fedloan Po Box 60610 Harrisburg, PA 17106 8339227671FD00004	Unsecured Claim	\$0.00	

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
61.	Fingerhut PO Box 2900 St Cloud, MN 56395	Unsecured Claim	\$0.00
62.	First Credit Services, Inc. 371 Hoes Lane, Suite 300 B Piscataway, NJ 08854	Unsecured Claim	\$131.00
63.	First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107 5178006648292631	Unsecured Claim	\$555.00
64.	First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107 5178007409006459	Unsecured Claim	\$445.00
65.	Fitnes Connection PO Box 680768 Houston, TX 77268	Unsecured Claim	\$0.00
66.	FM 1960 Emergency Phys Phoenix Fin PO Box 98818 Las Vegas, NV 89193	Unsecured Claim	\$1,679.00
67.	Gerber Life Insurance 445 State St Freemont, MI 49412	Unsecured Claim	\$3,000.00
68.	Gold's Gym 7900 Ritchie Hwy Ste 129C Glen Burnie, MO 21061	Unsecured Claim	\$800.00
69.	Golds Gym 8741 Hospital Dr Douglasville, GA 30134	Unsecured Claim	\$0.00

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	D.L.		
	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
70.	Harris County Alarm Detail 9418 Jensen Dr. Ste A Houston, TX 77093	Unsecured Claim	\$75.00
71.	Harvest Associates, Inc. 1010 Spring-Cypress Rd, Box #138 Spring, TX 77373-2503	Unsecured Claim	\$0.00
72.	Harvest Associates, Inc. 821 Crossbridge Dr Spring, TX 77373	Unsecured Claim	\$0.00
73.	HCTRA- Violations Dept 1 PO Box 4440 Houston, TX 77210-4440	Unsecured Claim	\$850.00
74.	Houston Methodist PO Box 3133 Houston, TX 77253-3133	Unsecured Claim	\$1,500.00
75.	Houston Methodist PO Box 3133 Houston, TX 77253-3133	Unsecured Claim	\$20.00
76.	Houston Northwest Med PO Box 740785 Cincinnatti, OH 45274-0785	Unsecured Claim	\$1,532.00
77.	Houston Northwest Medical Center PO Box 830913 Dallas, TX 75284	Unsecured Claim	\$0.00
78.	Houston Northwest Medical Center PO Box 740785 Houston, TX 77914-1535	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
79.	Houston NW Radiology Assoc. PO Box 3686 Dept. 467 Houston, TX 77253	Unsecured Claim	\$40.00
80.	HSN PO Box 9090 Clearwater, FL 33758-9090	Unsecured Claim	\$1,000.00
81.	Hunter Warfield 4620 Woodland Corporate Tampa, FL 33614 5003490	Unsecured Claim	\$3,693.00
82.	Hunter Warfiled 3111 W. Dr. Martin Luther King Blvd #200 Tampa, FL 33607	Unsecured Claim	\$0.00
83.	Imagine/atlanticus Pob 105555 Atlanta, GA 30348 7723110001991239	Unsecured Claim	\$0.00
84.	IRS Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346	Priority Claim	\$3,322.00
85.	IRS 1919 Smith Street, STOP 5024 HOU Houston, TX 77002	Unsecured Claim	\$0.00
86.	Jefferson Capital Syst 16 Mcleland Rd Saint Cloud, MN 56303 3423281842003	Unsecured Claim	\$616.00
87.	Jefferson Capital Systems 16 McLeland Rd St Cloud, MN 56303	Unsecured Claim	\$616.00

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	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
88.	Jonathan Neil & Ass, Inc. 18321 Ventura Blvd. Suite 1000 Tarzana, CA 91356	Unsecured Claim	\$0.00
89.	Lab Corp PO Box 2240 Burlington, NC 27216	Unsecured Claim	\$4,000.00
90.	Law Office of Joel Cardis LLC 2006 Swede Rd Suite 100 E. Norriton, PA 19401	Unsecured Claim	\$643.00
91.	Lendmark Financial Ser 2118 Usher St Nw Covington, GA 30014 4502555002	Unsecured Claim	\$0.00
92.	Linebarger, Goggan, Blair & Sampson 4828 Loop Central Dr. Suite 500 Houston, TX 77081	Unsecured Claim	\$850.00
93.	Linebarger, Goggan, Blair et al 900 Arion Pkwy Ste 104 San Antonio, TX 78216	Unsecured Claim	\$0.00
94.	Lori Sweitzer OB Gyn 2000 Medical Pkwy Ste 310 Annapolis, MD 21401	Unsecured Claim	\$2,000.00
95.	M and T Bank 1 Fountain Plaza 7th Floor Buffalo, NY 14203	Unsecured Claim	\$1,000.00
96.	M&T Bank PO Box 62182 Baltimore, MD 21264-2182	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
97.	Mariner Finance 1650 Louetta Rd Suite 200 Spring, TX 77388	Unsecured Claim	\$0.00
98.	Mariner Finance 8211 Town Center Dr Nottingham, MD 21236	Unsecured Claim	\$0.00
99.	Marinr Finc 8211 Town Center Dr Nottingham, MD 21236 100301725411	Unsecured Claim	\$142.00
100.	Maryland Primary Care Phys PO Box 62676 Baltimore, MD 21264	Unsecured Claim	\$50.00
101.	MCM PO Box 300 San Deigo, CA 92108	Unsecured Claim	\$0.00
102.	Medicredit Inc PO Box 1629 Maryland Heights, MO 63043-0629	Unsecured Claim	\$867.00
103.	Memorial Hermann PO Box 4370 Houston, TX 77210-4370	Unsecured Claim	\$525.00
104.	Mercantile Adjmnt Bur 165 Lawrence Bell Dr Ste Buffalo, NY 14221 64239755	Unsecured Claim	\$808.00
105.	Merrick Bank Corp Pob 9201 Old Bethpage, NY 11804 4120614019277834	Unsecured Claim	\$896.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
106.	MHMG Woodlands Card 9180 Pinecroft Dr Ste 400 Spring, TX 77380-9999	Unsecured Claim	\$25.00
107.	Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108 8567568280	Unsecured Claim	\$651.00
108.	Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108 8567579044	Unsecured Claim	\$394.00
109.	N.A.R. PO Box 505 Linden, MI 48451-0505	Unsecured Claim	\$0.00
110.	National Recovery Agen 2491 Paxton St Harrisburg, PA 17111 11127957	Unsecured Claim	\$198.00
111.	National Recovery Agen 2491 Paxton St Harrisburg, PA 17111 11127960	Unsecured Claim	\$112.00
112.	Nationwide Mutual Inrance Co 1100 Richmond Ave, Ste 400 Houston, TX 77042	Unsecured Claim	\$0.00
113.	Navy Federal Cr Union Po Box 3700 Merrifield, VA 22119 43000867711301	Unsecured Claim	\$0.00
114.	NPAS Solutions, LLC PO Box 33188 Louisville, KY 40232	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
115.	PayPal Credit PO Box 105658 Atlanta, GA 30348-5658	Unsecured Claim	\$100.00
116.	Pediatric Place PO Box 14000 Belfast, ME 04915	Unsecured Claim	\$252.00
117.	Pelican Auto 9444 Farnham St Ste 200 San Diego, CA 92123 10187	Unsecured Claim	\$0.00
118.	Pelican Auto Finance L 9444 Farnham St Ste 200 San Diego, CA 92123 14543	Unsecured Claim	\$0.00
119.	Pendrick Capital Partners 2810 Southampton Rd Philadelphia, PA 19154	Unsecured Claim	\$0.00
120.	Penn Credit Corp 916 S 14th PO Box 988 Harrisburg, PA 17108-0988	Unsecured Claim	\$0.00
121.	Phoenix Financial Serv 8902 Otis Ave Ste 103a Indianapolis, IN 46216 42923737	Unsecured Claim	\$1,064.00
122.	Phoenix Financial Serv 8902 Otis Ave Ste 103a Indianapolis, IN 46216 42923735	Unsecured Claim	\$713.00
123.	Phoenix Financial Services LLC PO Box 26580 Indianapolis, IN 46226-0580	Unsecured Claim	\$0.00

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	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
124.	Planet Fitnes 5604 Silver Hill Rd. District Heights, MD 20747	Unsecured Claim	\$300.00	
125.	Plaza Servic 110 Hammond Drive Suite 110 Atlanta, GA 30328 47200158879301001	Unsecured Claim	\$8,985.00	
126.	Plaza Servic 110 Hammond Drive Suite 110 Atlanta, GA 30328 45025550	Unsecured Claim	\$6,566.00	
127.	Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541	Unsecured Claim	\$0.00	
128.	Progressive Insurance Dept 0583 Carol Stream, IL 60132	Unsecured Claim	\$0.00	
129.	Progressive Insurance PO Box 94568 Cleveland, OH 44101	Unsecured Claim	\$0.00	
130.	Progressive Leasing 256 West Data Dr Draper, UT 84020	Unsecured Claim	\$3,020.00	
131.	Public Storage 1492 S Clinton St Denver, CO 80247	Unsecured Claim	\$600.00	
132.	Quest Diagnostice Inc. PO Box 740698 Cincinnati, OH 45274-0698	Unsecured Claim	\$3,000.00	

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
133.	QVC 1356 Enterprise Dr. West Chester, PA 19380	Unsecured Claim	\$0.00
134.	QVC 1010 N Loop 1604 E San Antonio, TX 78232	Unsecured Claim	\$525.00
135.	Radius Global Solutions LLC 7831 Glenroy Rd., Ste Suite 250-A Minneapolis, MN 55439-3132	Unsecured Claim	\$0.00
136.	Receivable Management Pob 17305 Richmond, VA 23226 R800PAT0018671592	Unsecured Claim	\$282.00
137.	Receivable Management Pob 17305 Richmond, VA 23226 R800PAT0019454744	Unsecured Claim	\$187.00
138.	Receivables Management Sol, Inc. 992 So. Robert St. West St. paul, MN 55118	Unsecured Claim	\$0.00
139.	Reliant Energy PO Box 3765 Houston, TX 77253-3765	Unsecured Claim	\$1,600.00
140.	Rent A Center 5501 Headquarters Drive Plano, Texas 75024	Unsecured Claim	\$600.00
141.	Rent A Center 7722 Ritchie Hwy Glen Burnie, MD 21061	Unsecured Claim	\$700.00

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	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
142.	Resort Financial Services PO Box 93742 Las Vegas, NV 89193-3742	Unsecured Claim	\$0.00	
143.	Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161 30000179769921000	Unsecured Claim	\$11,239.00	
144.	Shop NBC PO Box 305249 Nashville, TN 37230-5249	Unsecured Claim	\$0.00	
145.	SK Enterprises 5202 Bingle Rd Houston, TX 77092	Secured Claim	\$2,658.00	
146.	Specialized Collection System, Inc PO Box 441508 Houston, TX 77244-1508	Unsecured Claim	\$40.00	
147.	Sprint 899 Eaton Ave. Bethlehem, PA 18025-0023	Unsecured Claim	\$0.00	
148.	Sprint PO Box 17990 Denver, CO 80217-0990	Unsecured Claim	\$0.00	
149.	State Emp Cu Of Maryla 8501 Lasalle Rd Baltimore, MD 21204 5430690772900673	Unsecured Claim	\$0.00	
150.	State Farm 8900 Amberglen Blvd Austin, TX 78729-1110	Unsecured Claim	\$800.00	

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
151.	State Of Md/ccu 300 W Preston St Ste 503 Baltimore, MD 21201 9007430	Unsecured Claim	\$3,119.00
152.	Suntrust Bank PO Box 305183 Nashville, TN 37230-5183	Unsecured Claim	\$3,000.00
153.	Suntrust Bank 100 Crain Hwy SW Glen Burnie, MD 21061	Unsecured Claim	\$1,000.00
154.	Synergetic Comm 1301 E. 3rd Ave Suite 200 Post Falls, ID 83854	Unsecured Claim	\$0.00
155.	TD Bank 200 South 108th Ave Omaha, NE 68154-2631	Unsecured Claim	\$0.00
156.	TD Bank 7926 Crain Hwy S Glen Burnie, MD 21061	Unsecured Claim	\$700.00
157.	Td Banknorth Maine 32 Chestnut St Lewiston, ME 04240	Unsecured Claim	\$0.00
158.	Tower FCU 1077 MO 3 Gambrills, MD 21060	Unsecured Claim	\$100.00
159.	Transworld Sys Inc/51 500 Virginia Dr Ste 514 Ft Washington, PA 19034 85567264	Unsecured Claim	\$75.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
160.	Transworld System Inc/ 500 Virginia Dr Ste 514 Fort Washington, PA 19034 61245945	Unsecured Claim	\$1,075.00
161.	Transworld Systems Inc PO Box 15393 Wilmington, DE 15393	Unsecured Claim	\$0.00
162.	Transworld Systems Inc. 5880 Commerce Blvd. Rohmert Park, CA 94928-1651	Unsecured Claim	\$0.00
163.	TX EM-I Med Services PC PO Box 99034 Las Vegas, NV 89193-9034	Unsecured Claim	\$79.00
164.	U S Dept Of Ed/gsl/atl Po Box 4222 Iowa City, IA 52244 23601852	Unsecured Claim	\$0.00
165.	United Acceptance Inc 2400 Lake Park Dr Smyrna, GA 30080 19981301	Unsecured Claim	\$0.00
166.	United Recovery Systems Inc PO Box 722929 Houston, TX 77272-2929	Unsecured Claim	\$0.00
167.	United Recovery Systems, Inc. 3100 S. Gessner, Ste 400 Houston, TX 77063	Unsecured Claim	\$0.00
168.	University of Maryland PO Box 64021 Baltimore, MD 21264-4021	Unsecured Claim	\$475.00

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	Debtor		Case No. (if known)
	Creditor name and mailing address	Category of claim	Amount of claim
169.	UR Furniture 16747 A North Freeway Houston, TX 77090	Unsecured Claim	\$0.00
170.	Vehicle Solutions Corp 104 Crandon Blvd Ste 400 Key Biscayne, FL 33149	Secured Claim	\$7,466.00
171.	Venture General Agency PO Box 1970 Marble Falls, SD 78654	Unsecured Claim	\$0.00
172.	Verizon Wireless 3587 Parkway Ln Norcross, GA 30092-2827	Unsecured Claim	\$0.00
173.	Wachovia Bank PO Box 96074 Charlotte, NC 28296-0074	Unsecured Claim	\$0.00
174.	Webbank/fingerhut 6250 Ridgewood Rd Saint Cloud, MN 56303 6369921502768277	Unsecured Claim	\$0.00
175.	Wells Fargo PO Box 93399 Albuquequer, NM 87199-3399	Unsecured Claim	\$0.00
176.	Wells Fargo PO Box 10438 Des Moines, IA 50306	Unsecured Claim	\$0.00
177.	Wf Efs Po Box 5185 Sioux Falls, SD 57117 57788459	Unsecured Claim	\$0.00

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in re:	Brandon D. French, Sr.			
	Debtor		Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim	
178.	Woodlands Emerg Phys PO Box 2487 Houston, TX 77252-2487	Unsecured Claim	\$1,500.00	
179.	Xfinity One Comcast Center 1701 JFK Blvd Philadelphia, PA 19103	Unsecured Claim	\$0.00	
180.	Xfinity 9602 S 300 W. Ste B Sandy, UT 84070-3302	Unsecured Claim	\$0.00	
	e penalty for making a false statement or concealing J.S.C. secs. 152 and 3571.)	g property is a fine of up to \$500,000 or imprison DECLARATION	nment for up to 5 years or both.	
	randon D. French, Sr.	market that the control of the formation About	mad Lietin a of Our ditama	
	ned as debtor in this case, declare under penalty of sisting of <u>21</u> sheets (including this declaration		•	
С	Debtor: _/s/ Brandon D. French, Sr. Brandon D. French, Sr.	Date: 3/28/2019	_	
Sį	oouse: /s/ Neallisha S. French Neallisha S. French	Date: 3/28/2019	_	